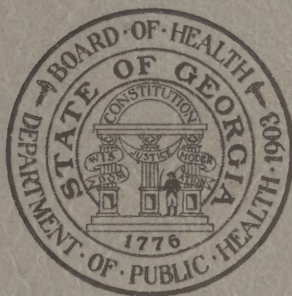


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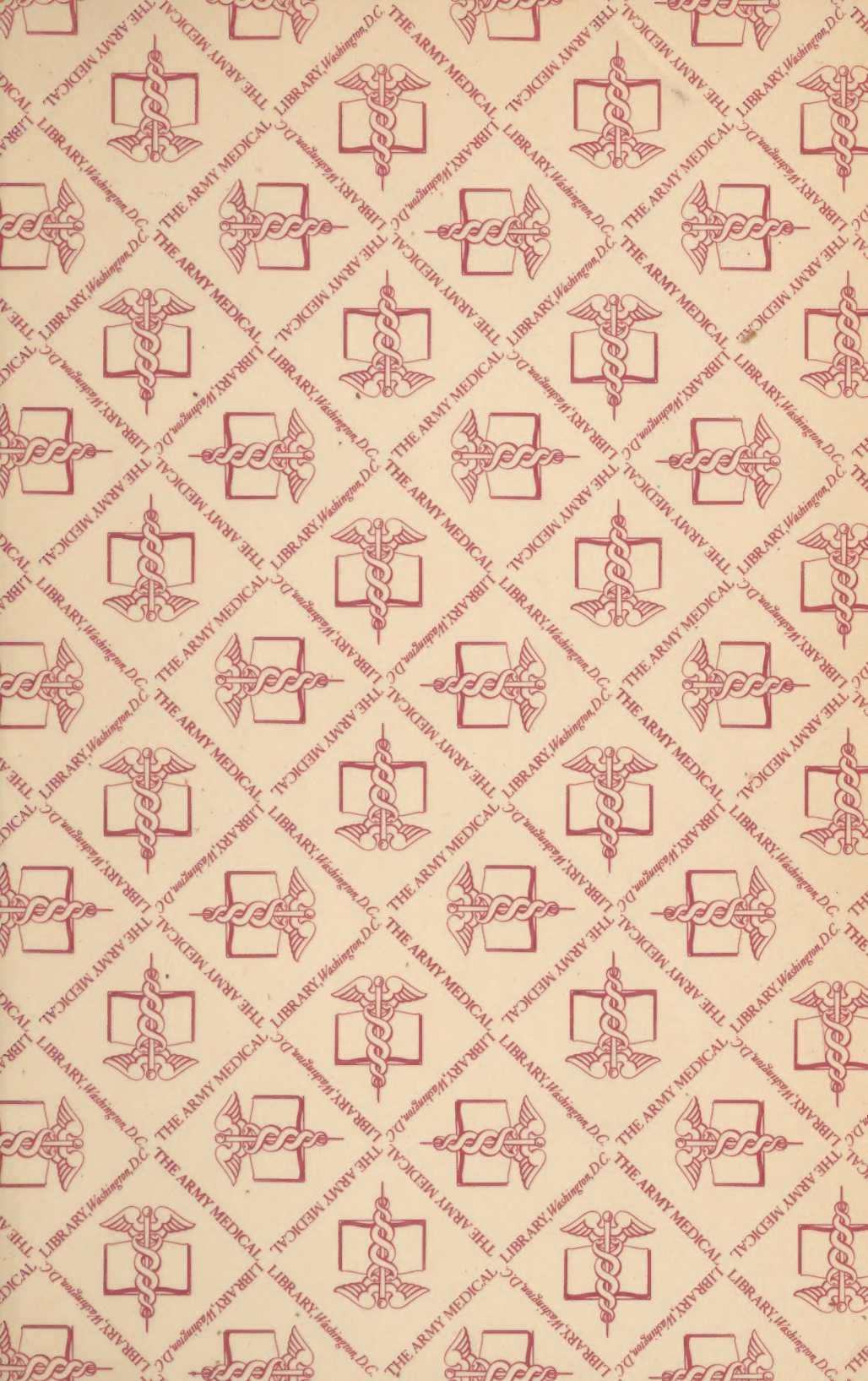
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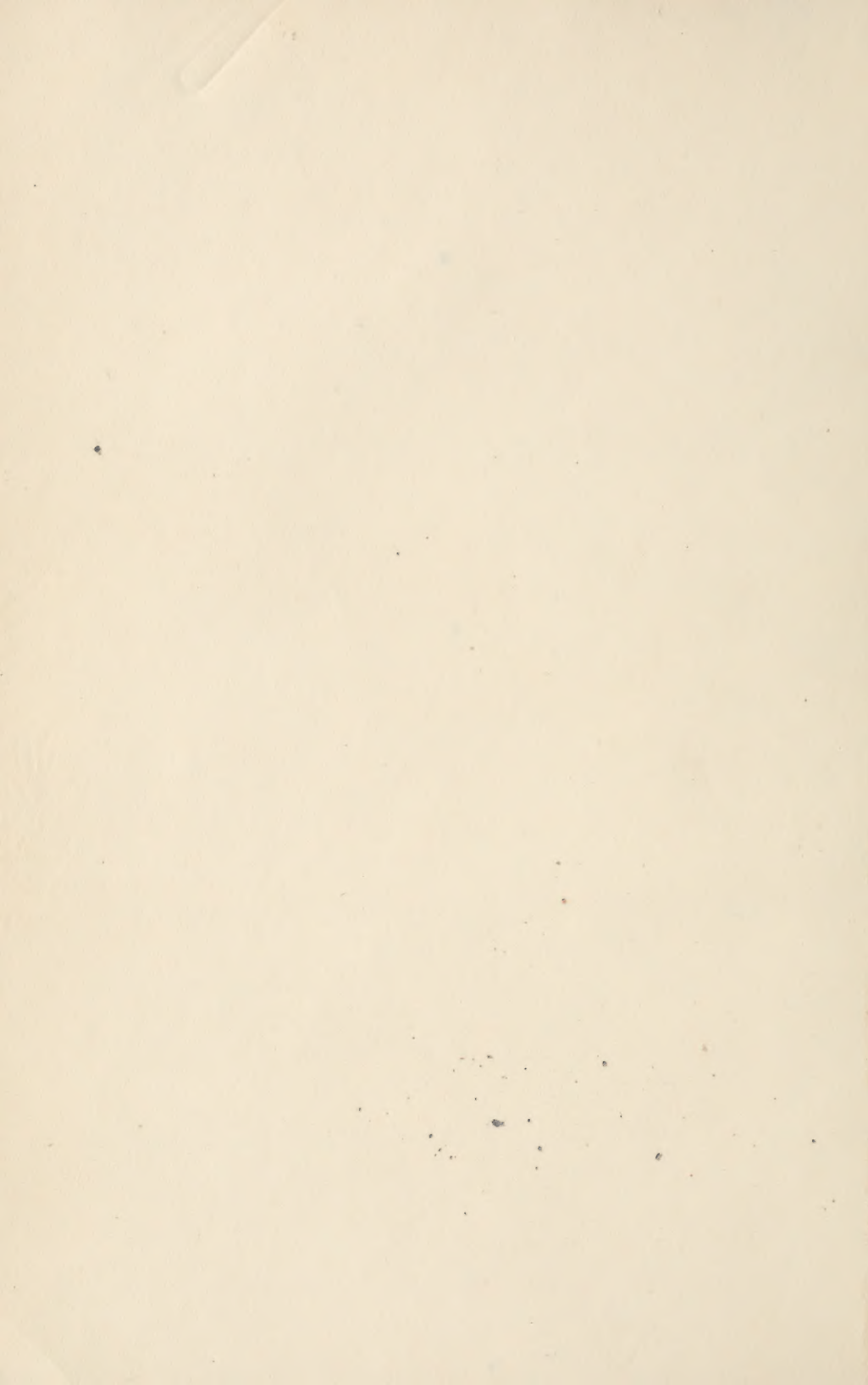
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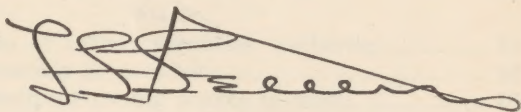
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FOREWORD

The law creating the State Board of Health provides that it "shall have supervision over all matters relating to the preservation of the life and health of the people". The term "supervision" implies primarily an advisory and directional role rather than one of policing and regimentation. Therefore, beyond this supervisory power no great amount of law from a State level is necessary. Hence, this volume is not large.

This third edition of Georgia's health laws and rules and regulations of the State Board of Health has been revised to include all new legislation enacted since June 1, 1946, as well as rules and regulations adopted by the State Board of Health.

Laws and regulations applicable to specific counties and municipalities are not included. Laws having indirect bearing on public health are mentioned only by title and proper references to the source.



T. F. SELLERS, M. D.
Director

November 29, 1949

PUBLIC HEALTH LAWS

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HEALTH PROGRAM**Resolution No. 27**

GEORGIA LAWS 1945

Whereas, One of Georgia's greatest needs is an expanded, serviceable, and intensive health program designed to eradicate disease, improve health conditions, accentuate the importance of health work, the economic value of good health, and the economic liability of poor health; and

Whereas, The State Board of Health, the Director of the State Department of Public Health, the State Department of Public Health and the Health Panel of the State Development Board have worked tirelessly in the advocacy and improvement of public health work in Georgia; and

Whereas, The medical profession, the hospitals, public and private, the nurses, technicians and scientists have labored and are laboring constantly in devoting their time, energies and talents to the improvement of the health of our people and the eradication of disease; and

Whereas, The United States Public Health Service has co-operated with and is assisting the State Department of Public Health in its work designed to build up the health of our people; and

Whereas, Economically, a sick person is never a full income producing citizen and Georgia by reason of the poor health of some of our people is not utilizing its full economic human potentialities; and

Whereas, A health program in our schools and colleges is and should be a part and parcel of a program of education—health and education being of the greatest possible value to our people; and

Whereas, The General Assembly and the State Administration recognize the importance of health work and the debt of gratitude the people owe to those engaged in public and private health and hospital work:

Be It Therefore Resolved by the House of Representatives, the Senate concurring, That:

(1) The State Administration be and it is hereby committed to promoting and making possible a more expanded, more serviceable and more intensive health program in this State.

(2) The State Board of Health, the State Director of Public Health, the State Department of Public Health, the Health Panel of the State Development Board, the medical profession, the hospitals, public and private, the nurses, technicians, scientists, field workers, local health departments, and the United States Public Health Service be and they are hereby commended for the important part each is playing in improving health conditions in Georgia.

(3) That the General Assembly and the State Administration recognize the economic importance of good health and an expanded health program.

(4) That a health program be carried out in all our schools and colleges.

(5) That the State Board of Health is designated and authorized to become the channeling agent on behalf of the State for such health funds as may be made available by the Federal Government.

(6) The State Board of Health shall expend all funds received from the Federal Government or by appropriation from the State of Georgia, or by donation in conformity with law. In the expenditure of such funds the State Board of Health shall have the authority to prescribe the purposes for which such funds may be used.

(7) The State Board of Health shall make periodic reports to the people of Georgia and the General Assembly as to how health conditions in this State may be better improved and advanced.

(8) The State Department of Health and the State Board of Health shall cooperate with all health agencies, hospitals, medical centers, maternity homes, nursing homes and other such institutions in the advancement of health work in Georgia.

(9) The State Board of Health is directed to cooperate with county and local health departments and to assist them in all proper ways to bring about a more expanded and more serviceable health program.

(10) The State Department of Health and the State Board of Health are directed to give special attention to the possibility of constructing additional tubercular hospital and to give special attention to a consideration of the control and treatment of tuberculosis.

(11) The said State Board of Health shall make plans and

undertake to effectually supply health service to various counties of this State and to cooperate with local communities, counties, districts, and regions in the matter of constructing and assisting the said units in the maintenance and operation of hospitals and health centers.

(12) The said State Department of Health and Board of Health shall cooperate with private hospitals and agencies which are engaged in the improvement of the health of the people of Georgia.

(13) The State Board of Health shall provide for a State Advisory Council on health work which shall include representatives of non-governmental organizations or groups and all State and local agencies concerned with the operation, construction or utilization of hospitals and hospital facilities. The said Advisory Council shall diligently undertake to obtain all possible available Federal funds for health work in Georgia and shall make recommendations to the General Assembly through the State Board of Health as to how Georgia may best serve the interest of the people through expanded health services.

(14) That a copy of this resolution be dispatched to the Surgeon General of the United States in appreciation of the very fine work being rendered the people of Georgia by the United States Public Health Service and by the Surgeon General. (Acts 1945, pp. 1218-1221.)

STATE BOARD OF HEALTH AND STATE DEPARTMENT OF PUBLIC HEALTH

88-101, Georgia Code 1933. *Creation; management and control by State Board of Health.*—There is hereby created and established a department of the State Government to be known as the Department of Public Health, under the management and control of a Board of Health. (Acts 1933, pp. 7, 8.)

88-102, Georgia Code of 1933. *State Board of Health members; number; appointment; qualifications; Governor as ex-officio member.*—The Board of Health shall be composed of 14 members, appointed by the Governor and confirmed by the Senate, four from the State at large and one from each congressional district: Provided, that such appointments shall be made

from lists of nominees submitted to the Governor by the governing bodies of the Medical Association of Georgia, the Georgia Dental Association, and the Georgia Pharmaceutical Association. The nominees submitted by the governing body of the Georgia Pharmaceutical Association shall be from the State at large, and shall be at least four in number, from which two appointments shall be made by the Governor. The nominees submitted by the governing body of the Georgia Dental Association shall be from the State at large, and shall be at least four in number, from which two appointments shall be made by the Governor. The nominees submitted by the Medical Association of Georgia shall be at least 20 in number, two from each congressional district, from which 10 appointments, one from each congressional district, shall be made by the Governor. A majority of all the members of the Board shall, at all times, be practicing physicians in the State. The Governor shall be ex-officio a member of said Board of Health. (Acts 1933, pp. 7, 9.)

88-103, Georgia Code 1933. *Vacancies in Board; chairman and vice chairman.*—In case of a vacancy, from any cause, in the membership of the Board, the Governor shall fill the vacancy by appointment, to be confirmed by the next succeeding session of the Senate, from a list of at least two nominees submitted by the governing body of the organization named in section 88-102, whose nominee's place has become vacant. The Board of Health shall elect one of its members as chairman, and one as vice chairman. (Acts 1933, pp. 7, 10.)

88-104, Georgia Code 1933. *Terms of office of members of Board.*—The terms of office of the 14 members first appointed shall be as follows: Two shall be appointed for a term ending September 1, 1934; two for a term ending September 1, 1935; two for a term ending September 1, 1936; two for a term ending September 1, 1937; three for a term ending September 1, 1938; three for a term ending September 1, 1939; and their successors shall be appointed for full terms of six years each. (Acts 1933, pp. 7, 9.)

88-105, Georgia Code 1933. *Director of Department; election; qualifications; term of office; compensation; bond.*—The Board of Health shall elect a Director of the Department of Public Health, who shall devote his entire time to the work of the Department; hold office for a term of six years, unless re-

moved by the Board for incompetency or acts of moral turpitude after an open hearing before the Board; be provided with suitable offices at the State Capitol; receive such salary as may be fixed by said Board and approved by the Budget Bureau not to exceed ten thousand dollars (\$10,000) annually. Said director shall give bond for the faithful performance of his duties and for the faithful accounting for all moneys coming into his hands as Director of the Department of Public Health, in such amount and under such terms and conditions as may be prescribed by said Board of Health and approved by the Governor: Provided, that such Director shall be a graduate physician authorized to practice medicine and surgery in this State, and shall have had not less than five years' experience in the practice of said profession: Provided, further, that the present Director shall serve until the expiration of the present term of office and shall be eligible for election or appointment for additional terms of office thereafter. (Acts 1947, pages 1170-1171.)

88-106, Georgia Code 1933. *Secretary of Board; compensation; duties.*—The Board of Health shall elect a secretary, not a member thereof, from the clerical staff of the Department of Public Health, who shall serve without additional compensation for his duties as secretary, and who shall keep accurate minutes of each meeting of said Board, submitting such minutes to the chairman of the Board for his approval within 10 days after adjournment of such meeting. (Acts 1933, pp. 7, 10.)

88-107, Georgia Code 1933. *Rules and regulations of Board; powers, duties, and rights.*—The Board of Health shall establish such rules and regulations for its own direction as it may deem proper and may confer upon the Director of the Department of Public Health such duties and powers as it deems proper. The Board is vested with all of the powers, duties, privileges, and rights which by law existed in the State Board of Health prior to the Act approved August 28, 1931, abolishing the said State Board of Health: Provided, however, that no provision of this law shall be construed as giving said Board jurisdiction over . . . the State Training School for Mental Defectives at Gracewood. (Acts 1933, pp. 7, 11.)

Provided, however, that effective July 1, 1937, the authority and duties in supervising and conducting the management of the State Tuberculosis Sanatorium, as laid down in Chapter

35-4 of the 1933 Code of Georgia are hereby transferred and removed to the State Board of Health of Georgia. (Acts 1937, p. 368.)

88-108, Georgia Code 1933. *Duty to attend Board meetings; effect of absence.*—It shall be the duty of the members of the Board of Health to attend its meetings and to take part in its deliberations. The office of any member of the Board shall be vacated if he shall neglect to furnish a good and satisfactory excuse in writing to the Board for absence from two consecutive meetings of the Board. If any member for any cause shall fail to attend three consecutive meetings of the Board, without valid excuse or leave of absence from said Board or the chairman or vice chairman thereof, his office shall be declared vacant by the Board, and the secretary shall in either event notify the Governor and the president of the organization named in section 88-102, whose nominee's place has become vacant, of a vacancy in the Board, and the same shall be filled as hereinbefore provided. (Acts 1933, pp. 7, 11.)

88-109, Georgia Code 1933. *Annual inspections and report by Board.*—The Board, through committees of not less than two of its members, shall make at least one annual inspection of each activity of the Department of Public Health, and such committees shall report their findings and conclusions to the Board in writing. (Acts 1933, pp. 7, 12.)

88-110, Georgia Code 1933. *Compensation of members of Board; mileage; emoluments.*—The members of the Board shall each receive the sum of \$7 for each day of actual attendance at the meetings of the Board or on tours of inspection, in lieu of their personal expenses incurred thereby, and shall receive mileage to and from the place of meeting or place of visits and inspection, by the nearest practical route from their respective homes; such expenses and mileage to be paid by the State Treasurer out of the funds of the State, by executive warrant, on presentation of vouchers by the members of the Board, approved by the chairman and signed by the secretary. The members of the Board shall receive no emoluments or compensation for their service as such members. (Acts 1933, pp. 7, 12.)

88-111, Georgia Code 1933. *Clerks and assistants in Department.*—Under the direction and supervision of said Board of Health the Director of the Department may employ such clerks

and assistants as may be provided for in an appropriation made for the support of said Department. (Acts 1933, pp. 7, 12.)

88-112, Georgia Code of 1933. *Powers and duties of Board.*—The State Board of Health shall have supervision of all matters relating to the preservation of the life and health of the people. It shall have supreme authority in matters of quarantine, and may declare and enforce quarantine when deemed necessary. It shall make and enforce reasonable orders or regulations for the prevention of the spread of contagious or infectious diseases. It shall be the duty of all local boards of health and the public and municipal officers of this State to enforce such quarantine and sanitary rules and regulations as may be adopted by the State Board. The State Board shall make careful inquiry as to the cause of diseases, especially when contagious, infectious, epidemic, or endemic, and take prompt action to control and suppress them. It shall be the duty of the Board to collect and preserve records of births and deaths and report the same, together with other such useful information, annually, to the Governor. It shall respond promptly when called upon by the State or local governments and the municipal and county boards of health to investigate and report upon the water supply, sewerage, disposal of excreta, or ventilation of any place or public buildings. It shall not have power to supersede municipal boards of health where the same are properly maintained, but shall act in harmony with said local boards of health. It is made the duty of the State Board of Health to enforce the provisions of Chapter 88-4, relating to health and quarantine, in so far as the same may be done without violating any of the provisions relating to the duty of local boards of health; and the fines and forfeitures arising from the conviction of any person violating any of the laws of health and quarantine now of force in this State, or any violation of any reasonable rules and regulations for the protection of the public health promulgated by the State Board, shall be paid into the treasury of the city or county where said conviction was had, and be expended in aid of the quarantine and other sanitary laws. (Acts 1903, pp. 72, 73.)

*88-113, Georgia Code 1933. *Diphtheria antitoxine, distribution of.*—The State Board of Health shall ship to and keep with

*The State Department of Public Health now supplies diphtheria antitoxin free to physicians for the treatment of all cases of diphtheria.

the ordinaries a reasonable supply of diphtheria antitoxine for the purpose of supplying the needs of the physicians in each county, for charitable purposes only, and shall keep the proper dates on all packages so shipped, and the ordinaries are authorized and directed to turn over to the authorities of all charity and city hospitals of each county as demands are made by them such amount as they may need for the treatment of diphtheria in said hospitals. (Acts 1909, p. 130.)

*88-114, Georgia Code 1933. *Sale of diphtheria antitoxine by ordinaries.*—The ordinaries of each county, while being required to furnish diphtheria antitoxine for charitable purposes only, are authorized to furnish antitoxine to purchasers of same, who are unable to purchase antitoxine from the registered pharmacists in their county, at the regular retail price at which said dealers usually sell first-class antitoxine which conforms to the United States Pharmacopoeia requirements. (Acts 1909, p. 130.)

*88-115, Georgia Code 1933. *Proceeds of sales of diphtheria antitoxine.*—The revenue derived from the sale of diphtheria antitoxine, with the exception of 10 per cent., which may be deducted by the ordinaries for their expenses, shall be returned to the Georgia State Board of Health, to be used in the manufacture of antitoxine. (Acts 1909, p. 130; 1931, pp. 7, 11; 1933, p. 7.)

88-116, Georgia Code 1933. *Hydrophobia, prevention of.*—The State Board of Health is empowered and directed, as soon as practicable, to arrange for the preparation and manufacture, in its laboratory at the capitol, of material necessary for the treatment and prevention of hydrophobia according to the method of Pasteur, and to keep constantly on hand the necessary material sufficient in quantity to meet the requirements that any exigency may demand, and to distribute the same free of cost to physicians and surgeons over the State for the treatment of such of their patients as have been bitten by an animal suffering with rabies. (Acts 1906, p. 112; 1931, pp. 7, 11.) *Note: See Inoculation for Rabies, Georgia Laws 1945, page 141 of this bulletin, and regulations for the control of rabies adopted by the State Board of Health on March 22, 1939, page 145 of this bulletin.*

*The State Department of Public Health now supplies diphtheria antitoxin free to physicians for the treatment of all cases of diphtheria.

88-117, Georgia Code 1933. *Rules and regulations, authority of Board to make.*—The Board shall have authority to make such rules and regulations as are necessary to carry into effect the scope and purpose of this law, and especially such reasonable rules and regulations for the establishment, maintenance, and enforcement of quarantine regulations as the Board in its discretion may deem necessary, not in conflict with the laws of the State. (Acts 1903, pp. 72, 73; 1931, pp. 7, 11.)

88-118, Georgia Code 1933. *Reports of local boards of health to State Board.*—It shall be the duty of the local boards of health, and of physicians in localities where there are no health authorities, to report to the State Board of Health, promptly upon the discovery thereof, the existence of any of the following diseases, to wit: Asiatic cholera, yellow fever, scarlet fever, smallpox, diphtheria, typhus or typhoid fever, and such other contagious or infectious diseases as the State Board of Health from time to time may specify; and when any contagious or infectious disease shall become, or threaten to become, epidemic in any county, city, village or hamlet, and the local authorities shall neglect or refuse to enforce sufficient measures for its prevention, the State Board of Health may appoint a medical or sanitary officer, with such assistance as he may require, and it shall be the duty of such officer to enforce the orders or regulations of the State Board. (Acts 1903, pp. 72, 74; 1931, pp. 7, 11.)

88-119, Georgia Code 1933. *Annual report of State Board.*—It shall be the duty of the State Board of Health to make annual reports to the Governor on or before the first day of January of each year, which shall be for the preceding calendar year; and such report shall include so much of the proceedings of the Board, such information concerning vital statistics, such information respecting diseases, and such instructions on the subject of hygiene as may be thought useful by the Board for dissemination among the people, with such suggestions as to legislative action as it may deem necessary. (Acts 1903, pp. 72, 74; 1931, pp. 7, 11.)

Health Board Cooperation, Maternal and Child Health Service.

GEORGIA LAWS 1937.

Section 1. *Program of Services; Cooperation.* The State Board of Health is hereby designated as the State agency for and shall have the power to establish and administer a program for services for the purpose of promoting the health of mothers and children; supervise the administration of those services included in the program, which are not administered directly by it; extend and improve any such services including maternal and child health services administered by local maternal and child health units, and including all such services in existence on the effective date of this Act; co-operate with medical nursing and welfare groups and organizations; and provide for the development of demonstration services; to cooperate with the Federal Government through its appropriate agency or instrumentality in developing, extending and improving such services; and receive and expend all funds made available to the Department by the Federal Government, the State or its political subdivisions or from other sources for such purposes.

Section 2. The State Board is hereby authorized and empowered to cooperate with the Public Health Service of the United States Treasury Department in establishing and maintaining adequate public health services as provided for in Title 6 of the Federal Social Security Act, Public No. 271, 74th Congress, House Resolution 7260, approved August 14, 1935, and as said Act of Congress may be amended hereafter. (Acts 1937, pp. 688, 689.)

State Board of Health – Acquisition of Hospitals, Laboratories, etc.

GEORGIA LAWS 1943.

Section 1. Be it enacted by the General Assembly of the State of Georgia, and it is hereby enacted by authority of the same, that from and after the passage of this Act the Board of Health of the State of Georgia shall have the power to acquire such laboratories, hospitals, or other property, either

real or personal, by gift, purchase, devise or otherwise, as the said State Board of Health shall in its discretion deem advisable to afford proper treatment and care to patients and to carry out the public health program of this State. (Acts 1943, page 210.)

COUNTY BOARDS OF HEALTH

88-201, Georgia Code 1933. *Creation; membership; terms of office; vacancies; authority.*—A county board of health for each county is hereby created, composed of three persons, two of whom shall be members of such board by virtue of their offices, to wit: the county superintendent of schools, and the chairman of the board of roads and revenues of the county, or some other member of the board of roads and revenues of the county appointed by said chairman, or in counties having no such board, the ordinary of said county, and one reputable physician elected by the grand jury of the county, at the session of the superior court for said county next preceding the regular January session of the county board of health of said county, or at any succeeding session of said court. The physician so elected shall hold office for a term of four years, and until his successor is elected and qualified. All vacancies shall likewise be filled by elections by the grand jury, and the persons so elected shall hold office for the remainder of the term and until his successor is elected and qualified. The county boards of health shall have supervision over all matters relating to health and sanitation in their respective counties, with authority to declare and enforce quarantine therein subject to the provisions of this law. Any town or city within the county having a population of not less than 5,000 or not more than 20,000 as shown by the most recent decennial United States Census may appoint two members of the county board of health, and the membership of such board of health shall be increased to include such two members from each such city or town; provided, that said town or city participates in the expenses of the county health department as provided in Section 7 of this Act. (See section following 88-305, page 19 of this bulletin.) The said two members shall consist of the mayor or city manager, as determined by the governing body of the town or city, and one other citizen appointed by the mayor and council or other governing body of the town or

city. The term of such member shall be for four years or until his successor is appointed and qualified. Each city within the county having a population of more than 20,000 as shown by the most recent decennial United States Census shall appoint four members of the county board of health from such city as follows: the mayor or city manager, as determined by the governing body of the city, and three members appointed by the mayor and council of the city, and the membership of such board of health shall be increased to include such four members from each such city. The term of office of the three appointed members shall be four years or until their successors are appointed and qualified, except that when the first appointments are made one member shall be appointed for two years, one for three years, and one for four years. All vacancies shall be filled by the same method as above set forth for the appointment of such members, and such appointee shall hold office for the remainder of the term and until his successor is appointed and qualified. Each member of the several county boards of health, whether ex-officio or appointed as herein provided, shall have a certificate of membership on such board signed by the Director of the Georgia Department of Public Health, and take the oath of office usually taken by other county officers, before assuming the duties of the office. The clerk of the superior court of the county shall certify, under seal, to the Director of the Georgia Department of Public Health the names of the county school superintendent, the chairman of the board of roads and revenues, or ordinary, and the physician appointed to the board by the grand jury, with the dates of appointment and termination, and the clerks of the several towns and cities having representation on the county boards of health shall likewise certify, under seal, to the Director of the Georgia Department of Public Health the names of the members from such towns and cities. The county board of health shall have authority to pass rules and regulations which shall apply to citizens and premises within the limits of any city or town, or other area having a density of population comparable to that of a city or town whether incorporated or not, and which may or may not apply to citizens or premises in less densely populated or rural areas, as well as regulations which shall apply only to citizens or premises in sparsely populated or rural areas which may or may not apply to citizens or prem-

ises of cities, towns, or densely populated areas. (Acts 1914, pp. 124, 125; 1941, pp. 317, 318; 1943, pp. 371-385.)

88-202, Georgia Code 1933. *Meetings of board; compensation of members.*—Said county boards of health shall hold their regular sessions on the first Thursdays of January, April, July and October in the county courthouse, and may also meet in extra session at any time for county health purposes or when an emergency or necessity may require. The members of said boards shall receive as their compensation the sum of \$2 per diem while actually engaged in the performance of the duties of said board out of the funds of said county appropriated for quarantine and sanitation. (Acts 1914, pp. 124, 126.)

88-203, Georgia Code 1933. *Rules and regulations, authority of county boards to make.*—The county boards of health of the several counties shall have full power and authority to adopt, enact, establish, and maintain all such rules and regulations not inconsistent with the laws and Constitution of this State and of the United States, as they may deem necessary and proper for protecting the health of their respective counties, and for preventing the introduction, generation, and spread of infectious and contagious diseases therein. (Acts 1901, p. 61; 1914, pp. 124, 125; 1943, pp. 371-385.)

88-204, Georgia Code 1933. *Rules and regulations may be changed, repealed, etc.*—Said county boards of health shall have power and authority to alter, amend, add to, or repeal such rules and regulations, from time to time, as they may deem necessary and proper for the purpose of Chapters 88-2 and 88-3. (Acts 1914, pp. 124, 125.)

88-205, Georgia Code 1933. *Rules and regulations to be advertised* (Amended in 1943 by striking the following words: "shall have the written approval of not less than three reputable physicians of the county, and").—Such rules and regulations as may be established for any county, under the provisions of Chapters 88-2 and 88-3, and any amendments or alterations thereof, before the same shall have the force of law shall be posted at the courthouse door of the county and also published at least once in the newspaper of the county in which the sheriff's notices are advertised. (Acts 1901, p. 61; 1914, pp. 124, 125; 1943, pp. 371-385.)

88-206, Georgia Code 1933. *How expenses are to be paid.*—All cost and expense necessary and proper for carrying out of the provisions of Chapters 88-2 and 88-3 shall be paid out of the county treasury, and city treasuries as provided in Section 7 of this Act (See section following 88-305, page of this bulletin), and from funds of the Georgia Department of Public Health which may be appropriated by the General Assembly of Georgia, or allotted by the Federal Government, or other agencies as grants-in-aid. (Acts 1901, pp. 61, 62; 1914, pp. 124, 125; 1943, pp. 371-385.)

88-207, New Section of Georgia Code 1933. *City and county health departments.*—There are excepted from the provisions of this chapter those counties and municipalities in the State of Georgia which have heretofore provided or which may hereafter provide, pursuant to Acts of the General Assembly, for combined county and city health departments, or county-wide health departments, whether or not such acts refer to the provisions of this chapter or to the Acts from which it is codified; but such counties and municipalities are authorized to maintain and operate such combined or county-wide health departments pursuant to said respective acts upon a budget first approved by both the municipal and county taxing authorities of the cities and counties combining and by the county taxing authorities of the counties operating a county-wide health department, and all such acts heretofore enacted by the General Assembly are hereby ratified. Such combined or county-wide health departments shall, in all other respects, conform to Georgia Laws of 1914, pages 124-134, inclusive, and codified in Chapter 88-2 of the Code of Georgia of 1933 and popularly known as the Ellis Health Law, and such combined or county-wide health departments shall operate under the control of the State Department of Public Health. (Acts 1943, pp. 265, 266.)

COUNTY HEALTH DEPARTMENTS SANITARY DISTRICTS DISTRICT HEALTH COMMISSIONERS

88-301, Georgia Code 1933. *When provisions of Chapter become operative; when suspended.*—The provisions of sections 88-303 to 88-312 may become operative at any time upon the recommendation of the county board of health with the ap-

proval of the board of roads and revenues (or ordinary) but shall become operative in any county after the recommendation of two successive grand juries, but on such recommendation it shall become obligatory on the county boards of health and the county boards of roads and revenues and, in counties having no such board, upon the ordinary of said county, to carry out the provisions of this law, or the provisions of sections 88-303 to 88-312 of the Code of Georgia of 1933 may also be made operative in any county when a majority of the qualified voters of said county voting at an election held for said purpose shall have so expressed their wishes in the manner as hereinafter provided. When as many as one fifth of the residents of the county, qualified to vote for members of the General Assembly, shall have filed a written petition with the ordinary of any county in which the Ellis Health Law is not now operative, asking said ordinary to call an election for the purpose of determining whether the Ellis Health Law shall become operative in said county, it shall be the duty of the ordinary within ten days from the date of the filing of said petition to call an election for the purpose of submitting the said issue to the qualified voters of the county. The ordinary shall give notice of said election by publishing the same at least once in the official county organ thirty days before the date of the election. The ordinary shall have the authority to appoint election managers for the purpose of holding said election in the various precincts and the expenses of said managers and the other expenses of the election shall be paid out of the general funds of the county. The ordinary shall prepare the ballots for said election and on each ballot shall be printed the words "for making the Ellis Health Law operative in this county" and "against making the Ellis Health Law operative in this county", and should a majority of the qualified voters voting in said election vote "for making the Ellis Health Law operative in this county" then the ordinary shall consolidate the returns and so declare the result, and said Ellis Health Law shall immediately become operative in said county. Should a majority of the qualified voters in said election vote "against making the Ellis Health Law operative in this county" then said result shall be declared by the ordinary and the Ellis Health Law shall not become effective in said county.

If at said election a majority of the voters vote against making the Ellis Health Law effective in the county, no further

election upon said issue shall be held before the expiration of at least twelve months from the date of said election. After said Ellis Health Law shall have remained in operation in any county for a period of at least two years, either as a result of grand jury recommendation or an election as aforesaid, the operation of said Ellis Health Law may be suspended in any county upon the recommendation of two successive grand juries of said county if it became operative by grand jury recommendation, or by vote of the people if it became operative by an election as aforesaid. (Acts 1914, pp. 124, 126; 1941, pp. 329-331; 1943, pp. 371-385.)

88-302, Georgia Code 1933. *Division of State into sanitary districts.*—The State shall be divided into sanitary districts as follows: Each county shall constitute a sanitary district, except that two or more counties may be combined into one sanitary district. Said combination of counties into a joint sanitary district shall be made by the State Board of Health upon the recommendation and consent of the county boards of health of the counties concerned. (Acts 1914, pp. 124, 126; 1931, pp. 7, 11; 1933, p. 7; 1943, pp. 371-385.)

88-303, Georgia Code 1933. *District commissioners; appointment; qualifications; term of office; examination; suspension.*—In every such sanitary district there shall be appointed a district commissioner of health for a term of four years. For a county district the appointing board shall be the county board of health and for districts composed of more than one county the appointing board shall be composed of the boards of health of all the counties composing said district, who shall meet in joint session for said purpose. The district commissioners of health shall be appointed from an eligible list furnished by the Director of the State Board of Health. This list shall contain the names of those who have passed a satisfactory examination in hygiene and sanitation and State health laws, and certain books and reports may be prescribed by the examining board as the basis of such examinations. The Director of the State Board of Health shall, with the aid of a committee from the State Board, examine all applicants for the position of district health commissioner under rules prescribed by the State Board and the provisions of this law; and he shall supervise the work of all district commissioners of health and shall have the authority to suspend such commissioner for incompetency, wilful

neglect of duty, immorality, or the commission of a crime involving moral turpitude, with the right of appeal by the party so suspended to the State Board, whose decision shall be final. No person shall be examined except a licensed physician, able-bodied, temperate and of good moral character. The examining board shall prepare a list of questions on the several subjects upon which the applicants shall be examined and send the same to the county superintendents of schools under whose supervision the examinations shall be held. The applicant shall sign his examination paper by number, and in a sealed envelope accompanying said paper shall give his name and the number he has adopted so that his name shall not be known until after the board of examiners shall have passed upon the question of his admission or rejection. The board of examiners shall prescribe and fix a certain standard percentage for passing such examination: Provided, that each person applying for examination shall be a resident of the State, and shall pay in advance to the Director of the State Board of Health the sum of \$5 as an examination fee. All such fees shall be covered into the general fund. Each person passing such examination shall be entitled to a certificate signed by the Director of the State Board of Health, under the seal of the State Board of Health, which shall be conclusive of the facts stated herein as to such examination and qualifications. The said Director of the State Board of Health shall, as soon as the results of an examination have been arrived at, file a copy thereof in his office showing the persons who have been passed, and at the same time send by mail a complete list of those who have passed to the chairman of each county board of health. Regular examinations shall be held by the board in the months of October and April of each year; and special examinations may be held by the Director of the State Board of Health to fill vacancies and he may issue a certificate which will hold good until the next regular examination. No examination fee shall be required of one holding a temporary certificate, provided same was paid at the time of standing the special examination. (Acts 1914, pp. 124, 127; 1931, pp. 7, 11; 1933, p. 7.) *Note: Some provisions of this section changed by an Act establishing a Merit System. See Georgia Laws 1943, pp. 171-177.*

88-304, Georgia Code 1933. *Appointment of commissioner; acceptance; oath; bond; salary; vacancy.*—The various appointing boards herein authorized and designated, shall meet quad-

rennially on the first Thursday in January, to perform the duties herein prescribed. They shall on such day or on any adjourned day when necessary, select from the list of eligible candidates who have passed any of the examinations herein provided for, and appoint a health commissioner for the districts over which jurisdiction is conferred upon them. Such commissioners shall hold office until their successors are appointed and qualified unless sooner removed, as provided herein. The appointing boards shall fix the salaries of said officers as hereinafter provided. In case a vacancy arises in such office before the expiration of the term, the appointing board for such district shall meet within 10 days thereafter on the call of the chairman of said board or of any two members thereof, and shall fill said vacancy in the same manner as is herein prescribed for regular appointments. Any person so appointed to fill a vacancy shall hold office for the remainder of the term and until his successor is appointed and qualified. Each health commissioner appointed shall file his acceptance and his constitutional oath of office with the ordinary of the county in the county districts and with the ordinary of the county having the larger population in the case of sanitary districts consisting of more than one county. Each commissioner shall be required to give bond in the penal sum of \$1,000 conditioned for the faithful performance of his duties, which bond shall be filed with the same person as prescribed for the filing of the oath of office. Such acceptance, oath of office and bond shall be filed and approved by the person receiving same within 10 days after such appointment shall have been made. (Acts 1914, pp. 124, 128.)

88-305, Georgia Code 1933. *Commissioners' entire time to be given to offices; powers; removal; successor to suspended commissioner.*—Such commissioners shall give their entire time to the duties of their offices and shall not engage in private medical practice or actively in any other line of business. They shall possess the statutory powers of constables within the districts for which appointed in all matters pertaining to public health and in enforcement of the health laws. They are hereby declared to be officers of the State and may be removed for malfeasance, misfeasance, or nonfeasance in office and for incompetency. When a district commissioner of health is suspended by the Director of the State Board of Health, as hereinbefore provided, the appointing board for said district shall appoint

a successor to such person until he is restored by law or until his successor is appointed and qualified; and the person so appointed to fill said vacancy shall take the oath and give the bond required by law of the regular incumbent. (Acts 1914, pp. 124, 129; 1931, pp. 7, 11; 1933, p. 7.)

Sections 88-306 and 88-307 of Georgia Code 1933 repealed in 1943 and following section substituted therefor:

Expenses of health department; taxes to meet.—It shall be the duty of the board of health of each county at its June meeting each year or other meetings when necessary to determine and fix the sum of money it deems necessary or expedient for the operation of a department of public health in the county for the ensuing year, and they shall certify to the board of roads and revenues or other proper taxing authorities of the county, and to the mayor and council or other governing body of all cities and towns in the county having a population of more than 20,000 as shown by the most recent decennial United States Census, and to the mayor and council or other governing body of all cities and towns within the county having a population of more than 5,000 and less than 20,000 as shown by the most recent decennial United States Census, which by action of its mayor and council elect to have representation on the county board of health and participate financially in its expenses, the amount so fixed upon and assessed, and the proper taxing authority of the county and each town and city within the county, as above set forth, shall levy a tax rate sufficient to raise its proportional part of the total amount fixed upon and assessed by the county board of health, at the same time and in the same manner as is prescribed for levying taxes for other county or city purposes. The amount so fixed upon and assessed for the support of such county health department shall be borne by the county and its contained cities and towns as may be agreed upon by the county board of health and the taxing authorities of the county and the contained towns and cities except that the principal city having a population of 20,000 or more shall contribute not less than fifty per cent of the health department budget derived from local funds, and that each town or city in the county having a population between 5,000 and 20,000, or secondary city having a population of more than 20,000, electing to have representation on the county board of health, shall contribute not less than \$1,000 per

annum. The remainder of the budget derived from local funds shall be paid from county funds. If the said taxing authorities fail to make such levies, then these amounts must be paid out of the fund levied for paying other lawful expenses of the county and city or cities, or the general funds not otherwise appropriated. Said county board of health shall then apply to the Director of the Georgia Department of Public Health for advice and assistance in establishing and/or maintaining a public health department in and for such county. (Acts 1914, pp. 124, 129, 130; 1943, pp. 371-385.)

88-308, Georgia Code 1933. *Office provided for commissioner.*—Each county shall provide suitable quarters for the district commissioner of health, either in the county courthouse or in rooms rented for such purposes. In sanitary districts composed of more than one county, each county shall provide quarters for said commissioner, but the commissioner may select any one of the county seats for his permanent office, which he may equip out of district funds provided therefor. (Acts 1914, pp. 124, 131.)

88-309, Georgia Code 1933. *Duties of commissioners.*—It shall be the duty of the district commissioners of health to be vigilant and diligent in the work of disease prevention and the conservation of public health, and to enforce all health laws of the State and health ordinances of their respective localities, together with the rules and orders of the State Board of Health. They shall be the executive officers of the county or district departments of public health they are appointed to serve, and in person or through an authorized agent shall make such sanitary inspections and surveys of their districts as may be required from time to time by the State Board of Health or by the county boards of health. They are hereby authorized and invested with the power to enter upon and inspect private property at proper times in regard to the possible presence, source, or cause of disease; to establish quarantine and in connection therewith to order what is reasonable and necessary for the prevention and suppression of disease; and to conduct programs of health education and perform such other duties as may be directed by the State Board of Health or county boards of health for the prevention of diseases and improvement of the health of the people of their county or district. They shall keep, or cause to be kept, a permanent record of all public

health work done in their county or counties as may be required by the State Board of Health or the county boards of health, and shall, once each month, make a report of all activities of their departments of public health in narrative and tabulated form, as may be required by the State Board of Health or their county boards of health. (Acts 1914, pp. 124, 131; 1931, pp. 7, 11; 1933, p. 7; 1943, pp. 371-385.)

88-310, Georgia Code 1933. *Powers and duties of commissioner in districts comprising more than one county.*—In sanitary districts composed of more than one county the district commissioner of health shall have in each county the same power, authority and duties as the commissioner of health in single county sanitary districts. In such districts the commissioner shall divide his time in proper ratio among the counties comprising said district. Every commissioner appointed under the provisions of this law shall at all times keep himself within reach of telephone and telegraph service, where possible, and shall respond without delay to the calls or orders of the Director of the State Board or local boards of health or health officers, when his assistance is required. (Acts 1914, pp. 124, 133.)

Section 88-311, Georgia Code 1933. In conflict with Section 2, Act. No. 409, pages 371 and 377, Georgia Laws 1943.

88-312, Georgia Code 1933. *Deputy commissioners and nurses, employment of.*—The county boards of health or district boards of health may employ as many deputy commissioners of health as they may deem necessary to serve the best interests of their counties or districts, and may also employ visiting nurses to aid them in the examination of school children and to instruct parents in matters pertaining to their children, and to perform such other duties as may be required of them by said boards. This section shall be so construed as to allow any county whether in a single county sanitary district or in a joint sanitary district to exercise all the rights and powers granted in this section. (Acts 1914, pp. 124, 133.)

Georgia Laws 1943. *Exempting certain counties.*—Be it further enacted that the provisions of this Act shall not apply to or affect any County having within its limits, in whole or in part, a city with a population of not less than 200,000 inhabitants by the 1940 Census or any future Census, until and unless

the Mayor and General Council or other governing body of such city, and the Board of Commissioners of Roads and Revenues or other governing body of the Counties in which such City is located in whole or in part shall by appropriate resolution or ordinance declare this Act to be effective within such Counties. This Act shall not apply to any County in which the County and the principal municipality therein maintain separate health departments, until the County Commissioners or other governing authority of such County and the Mayor and Council or other governing authority of such municipality shall by appropriate resolution signify that said County and said municipality shall come under the provisions of this Act. *Note: This section applies only to the revisions of Sections 88-201, 88-203, 88-205, 88-206, 88-301, 88-302, 88-306, 88-307 and 88-309, and such counties are not exempt from these sections as originally enacted. (Acts 1943, pp. 371-385.)*

MISCELLANEOUS LAWS AND RULES AND REGULATIONS

32-911, Georgia Code 1933. *Vaccination of pupils of public schools.*—The boards of education of each county and local system may make such regulations as in their judgment shall seem requisite to insure the vaccination of the pupils in their respective schools and may require all scholars or pupils to be vaccinated as a prerequisite to admission to their respective schools. (Acts 1880-1, p. 97; 1919, p. 325.)

32-1802, Georgia Code 1933. *Isolation and quarantine in infectious diseases.*—No parent or householder shall permit infected persons (or persons exposed to infection) to leave, or clothing, bedding, furniture, school books, library books, or other articles likely to convey infection, to be removed from the house until properly disinfected, under the supervision of the local board of health or its proper officer, or where no board exists, by the attending physician, in the manner recommended by the State Board of Health. (Acts 1919, p. 357.) *Note: Quarantine regulations omitted here. See "Official Bulletin on Control of Communicable Diseases."*

88-417, Georgia Code 1933. *Vaccination; compulsory measures.*—All county and municipal authorities shall be author-

ized and empowered to enact rules, ordinances, or regulations to authorize the proper officials of said municipalities or counties to require, under penalty, all persons at the time located in said municipalities or counties to submit to vaccination, in the event the health officers or the proper authorities think it advisable, for the purpose of preventing the spread of smallpox or any other contagious or infectious disease. (Acts 1897, p. 101.)

88-420, Georgia Code 1933. *Treatment of child to prevent blindness from gonococcus infection.*—It shall be the duty of any person who shall be in attendance on any childbirth to apply to the child such prophylactic treatment as may be prescribed by the State Board of Health to prevent blindness from gonococcus infection. Acts 1918, p. 255; 1931, pp. 7, 11; 1933, p. 7.) *Note: See Venereal Disease Control, pages 197-219 of this bulletin.*

88-421, Georgia Code 1933. *Report of inflammation of eyes of infants.*—Any person who shall nurse or attend any infant shall report any inflammation of the eyes of said child that shall develop within two weeks after birth to the local health officer or to a licensed physician. (Acts 1918, p. 255.) *Note: See Venereal Disease Control, pages 197-219 of this bulletin.*

105-1101, Georgia Code 1933. *Sale of unwholesome provisions.*—Any person who knowingly or carelessly sells to another unwholesome provisions of any kind, the defect being unknown to the purchaser, by the use of which damage results to the purchaser or his family, shall be liable in damages for such injury. *Note: See Restaurant and Tourist Camp Sanitation, pages 148-163 of this bulletin.*

105-1102, Georgia Code 1933. *Sale of adulterated drugs or liquors.*—Any person who, knowingly or carelessly, by himself or his agents, sells to another adulterated drugs or liquors, by the use of which damage accrues to the purchaser, his patients or his family, or his property, shall be liable in damages for the injury done.

105-1103, Georgia Code 1933. *Furnishing wrong article or medicine by vendor of drugs and medicines.*—If a vendor of drugs and medicines, by himself or his agent, either knowingly or negligently shall furnish the wrong article or medicine, and damage shall accrue from the use of the drug or medicine fur-

nished, to the purchaser, his patients or his family, or his property, the vendor shall be liable for the injury done.

105-1104, Georgia Code 1933. *Right of action in widow and children in case of death.*—If death shall ensue as a result of any injury or damage, in any case arising under the provisions of the three foregoing sections, the right of action for such death shall survive as provided in Chapter 105-13.

Cancer Prevention and Cure.

GEORGIA LAWS 1937.

Section 1. *Health Department duties.*—Be it enacted by the General Assembly of the State of Georgia, and it is hereby enacted by authority of the same, That from and after the passage of this Act it shall be the duty of the Department of Public Health to formulate a plan for the care and treatment of indigent persons suffering from cancer, and to establish and designate standard requirements for the organization, equipment and conduct of cancer units or departments in general hospitals in this State. The Department of Public Health shall consult with physicians designated by the President of the Medical Association of Georgia, and with such other experts or non-experts wherever located as the Department of Public Health may deem proper with a view to carrying out the purposes of this Act, and with a view of establishing and designating a minimum standard for the conduct and equipment of cancer units or departments in general hospitals in such parts or districts of the State as may, in the opinion of the Department of Public Health, be deemed most advantageous to the public health.

Section 2. *Preventive plan.*—Be it further enacted by the authority aforesaid, That said Department of Public Health of the State of Georgia shall formulate and put into effect an educational plan for the purpose of preventing cancer throughout the State of Georgia, and for the purpose of aiding in the early diagnosis of cancer, and for the purpose of informing hospitals and cancer patients of the proper treatment.

Section 3. *Rules and regulations.*—Be it further enacted by the authority aforesaid, That said Department of Public Health of the State of Georgia is authorized and directed to make rules

and regulations specifying to what extent and on what terms and conditions indigent cancer patients of this State may receive financial aid for the diagnosis and treatment of cancer in any hospital in this State approved by the Department of Public Health. The Department of Public Health is hereby authorized to furnish such aid to such indigent cancer patients of this State who are citizens of this State, to the extent of, and within the appropriations, as the Department of Public Health shall deem proper. The Department of Public Health shall have the power in its discretion to administer such aid in any manner which in its judgment will afford the greater benefit to cancer patients throughout the State, and shall have the power, to the extent of and within the appropriation herein provided, or which may be hereafter provided, to acquire such laboratories, hospitals, or other property, either real or personal, by gift, purchase, devise or otherwise, as the Department of Public Health shall in its discretion deem advisable to afford proper treatment and care to cancer patients in this State, and to carry out the intent and purpose of this Act.

Section 4. *Appropriation.*—That the sum of fifty thousand (\$50,000.00) dollars, is appropriated annually for the purpose of this Act, but the same is to be paid out of the amounts appropriated to the Department of Public Health by the General Appropriation Bill and the amount of fifty thousand (\$50,000.00) dollars is to be paid out of that fund and no other. (Acts 1937, pp. 587-589.)

Rules and Regulations for the Prevention and Cure of Cancer

Standards For the Organization of Cancer Clinics.

These essential requirements are summarized as follows:

1. The cancer treatment center shall be organized as a department in a modern general hospital.
2. Modern surgical equipment, superficial and deep X-ray therapy, radium, and diagnostic X-ray equipment shall be available for the treatment of patients.
3. Surgical, Radiological, and Pathological services shall be available.
4. Other medical services usually represented on the staffs

of general hospitals shall be available for consultation purposes, such as ophthalmological, otological, laryngological, urological, and gastrological services.

5. A regular clinic day shall be set for the admission of patients at which time members of the staff of the cancer treatment center shall be present. Patients on admission shall be seen by all the members of the Staff in consultation and the treatment planned according to the type of neoplasm present.

6. There shall be a regular clerk assigned to the clinic who shall keep careful records of all cases admitted to the clinic and follow-up the patients so as to ascertain results of treatment, requiring them to report back to the clinic at stated intervals in order to check up on their condition.

7. Clinical reports giving diagnosis, treatment and length of hospitalization, with follow-up reports as to condition of patient, shall be submitted to the office, Director of Cancer Control, State Department of Health, as will enable a complete record of the case to be on file at the central office.

8. Clinics applying for recognition as State-aid Cancer Treatment Centers shall meet minimum standards as set forth above and be on the list of the American College of Surgeons. Clinics in process of organization may be conditionally recognized for limited work during a period of one year or until such time as an inspection by the American College of Surgeons is made. Conditionally recognized clinics which do not gain recognition by the American College of Surgeons after probationary period of one year will be dropped from the list of recognized State Cancer Clinics.

Method of Obtaining State-Aid

Application for state-aid in the treatment of cancer must be made on behalf of the patient by the family physician on official blanks furnished for that purpose, giving all the information called for in the blank. The application must be signed by the Director of the County Welfare Department of the county in which the patient lives, certifying to the inability of the patient to pay for treatment and submitted to the office of the Director of the Cancer Control for approval.

Conditions Under Which State-Aid Patients Are Admitted to Cancer Treatment Centers

Patients must be authorized to report to state-aid treatment centers by the Director of the Cancer Control Division, State Department of Health, before they can be accepted by the treatment center. The basis for this authorization is the receipt at the office of the Director of the official application, properly filled in, and signed by the referring doctor and by the Director of the County Welfare Department of the county in which the patient lives.

Schedule of Payments Covering Costs to State-Aid Patients

Cancer Treatment Centers are not as a rule activities which will constitute a source of profit to those engaged in operating them. They are, however, a necessary service undertaken by public spirited members of the medical profession and have an important part in the reduction of the cancer mortality death rate which it is hoped can be effected through the operation of the Georgia Cancer Law.

The State reimburses Cancer Treatment Centers to which state-aid cases are sent according to the following schedule:

1. X-Ray:

X-ray films of head or extremity, per film.....	\$ 1.50
X-ray films of thorax or abdomen, per film.....	2.00
Gastro-intestinal series	9.00
Pyelograms	12.00

2. Laboratory:

Biopsies	\$ 3.00
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Biopsy is requested on all suitable cases to establish the diagnosis, and when the section of tissue has been diagnosed by a pathologist, a well mounted paraffin section is to be forwarded to the office of the Director, Division of Cancer Control for filing as a part of the permanent record of the case. (According to State Plan for Cancer Tissue Diagnostic Service, approved June 1, 1940.)

3. Blood Transfusions:

A flat fee of \$5.00 will be allowed for blood transfusion. This is to include the matching of a sufficient number of persons to obtain one or more suitable donors as may be needed and the administration of the transfusion or transfusions needed.

4. Diagnostic Curetage:

Suspicious cases of uterine bleeding may be admitted to the hospital for a period of not more than twenty-four hours for a diagnostic curetage or cervical biopsy. Sufficient radium may be administered to control bleeding while waiting for biopsy report. Future treatment and hospitalization to be determined by the biopsy report. (If case is found to be non-malignant not more than three hospital days will be paid for.)

5. Routine Laboratory Work Covered By Per Diem Cost:

In regard to other diagnostic procedures, such as hemoglobin determinations, red and white cell counts, urine and gastric analysis, the Committee is of the opinion that this is a part of the regular clinical diagnostic service furnished by the hospital and that no special charge for these tests should be made.

6. Surgical:

Surgeons of the various clinics have agreed to donate their services as in the case of any other charity patient. This act is necessary due to the small amount of the appropriation available for state-aid, and the desire on the part of all to enable as many patients as possible to be treated.

Use of operating room (major).....	\$5.00
Use of operating room (minor).....	3.00
Anesthetic, general	5.00
Surgical dressings at cost not to exceed, per dressing.....	.50
Intra-uterine insertion of radium.....	3.00
(No charge for operating room.)	

That minor operations, the taking of biopsies in emergency or examining-room when a general anesthetic is not necessary, be not charged for, but be covered by the three dollar (\$3.00) fee allowing for histological examination of the biopsy.

7. X-Ray and Radium Therapy:

Superficial X-ray Therapy (80-120 K. V.), per 100 Ru.....	.50
With a minimum charge of \$3.00.	
Deep Therapy, (180-220 K. V.), per 100 Ru.....	.50
With a maximum charge of \$50.00.	
Radium Therapy, per 100 mg. hrs.....	.75
With a minimum of \$5.00 and a maximum charge of \$50.00.	

8. Treatment of Multiple Lesions at Minimum Rate:

When two or more lesions are treated on the same patient,

on the same or successive days in one course of treatment, on the basis of the minimum charge for each lesion, the maximum charge shall not exceed \$10.00 for any one case.

9. Combination Deep X-Ray and Radium Treatment:

Where both deep X-ray and radium therapy are used in the same case, the maximum combined charge is not to exceed \$90.00.

10. Hospital Board:

Hospital board has been fixed at a uniform rate of \$3.50 per day for all clinics limited to minimum number of days necessary for carrying out prescribed treatment.

11. Transportation:

Patients are expected to bear the costs of transportation to and from the clinics.

12. Ambulatory Cases:

Ambulatory cases under treatment are expected to stay with some friend or relative or to provide themselves with board while receiving treatment at the cancer centers. Where an ambulatory patient is completely destitute and can make no other arrangements, the hospital may arrange for him to board at some nearby place at a cost not to exceed \$1.50 per day. These bills will be cleared through the fiscal agent of the clinic.

13. Non-Malignant Cases:

Conditions other than cancer cannot be treated from state funds. When a case for diagnosis is found to be non-malignant, the financial obligation of the State to that patient then ceases, and no further hospital costs incurred by that patient can be paid out of State funds, regardless of how urgently the patient may need treatment for some other condition. Case is to be referred back to local doctor.

When from history and physical examination a clinical diagnosis of fibromyoma of uterus is made, the patient cannot be accepted as a state-aid case for operation on the basis of the remote possibility of malignant degeneration. D. and C. may be done if necessary to rule out cancer.

On the same basis, goiter cannot be accepted for treatment under the Cancer Control Program, unless proven by biopsy that a malignant change has taken place. (Only about 2 per cent of the adenomatous type undergo malignant changes.)

Hodgkin's Disease, lymphosarcoma and leukemia are subject

to treatment in early cases only so long as they respond satisfactorily and patient's physical condition is improving. Advanced cases will not be accepted for treatment; nor will treatment be continued in cases which are on the down grade.

Epuli and mixed tumors of the salivary glands are usually benign in nature but may become malignant, especially the latter. These are easily cured by surgical removal in the early stages; thus preventing malignant or destructive tissue changes later. They are acceptable for surgical removal for diagnosis when in the opinion of the clinic this is thought advisable.

Clinical fibromas and lipomas should be removed surgically for histological diagnosis.

Malignant melanomata rarely respond to treatment and for this reason are unacceptable, likewise Von Recklinghausen's Disease.

14. Advanced Cancer

Cancer in a state so far advanced as to offer little or no hope of arrest cannot be treated from state funds. Evidence of extensive glandular metastasis or metastases to the internal organs or bones is sufficient evidence the case is too far advanced for treatment; also, persons suffering from infirmity of age who are likely in the natural course of events to die of other conditions before cancer can be cured will not be treated, (persons over 75 years old with low grade cancer will likely die in natural course of events before the cancer kills them, persons of this age with advanced cancer cannot have any life expectancy any way, consequently, persons of advanced age should not be treated.)

The referring physician should receive a full report of the case and the opinion of the clinic explaining why the case cannot be treated.

15. Clinical Reports:

A clinical report giving data called for in clinical report forms furnished for that purpose, should be made to the office of the Director, Cancer Control Division, State Department of Health, as soon as examination has been completed on the patient's first visit to the clinic with outline of proposed treatment. A copy of this report should be sent to the referring doctor.

Additional clinical reports should be made at the end of each month in which the patient was hospitalized or received any

examination or treatment, giving date of hospitalization, clinical progress report, the kind and amount (X-ray, radium) of treatment received during the month and date on which same was given.

Bills for services are checked by the Clinical Reports, no service can be paid for unless same is shown on Clinical Record.

16. Diagnostic Costs:

When the condition is questionable as to its nature, a diagnosis must be made before the treatment is begun, using any or all the recognized diagnostic methods: X-ray, biopsy, physical examination, and laboratory, etc., which will be paid for according to above schedule, also hospitalization at \$3.50 per day incident to the completion of these tests. Diagnostic cases must necessarily be held within reasonable limits. Hospitalization for diagnostic cases is limited to three days unless permission for extension of time is necessarily authorized by Director of Cancer Control.

17. Excessive Hospitalization:

The State will not be responsible for hospital care for patients before examination or treatment is begun—nor after treatment is completed. Financial responsibility for patients refusing to leave hospital after completion of treatment will not be assumed by the State. This is a problem of hospital administration incident to handling charity patients.

18. Failure to Respond to Treatment:

The Director of the Division of Cancer Control may direct that any patient under treatment who fails to show reasonable improvement commensurate with cost of treatment be dismissed from further state-aid.

The Director of the Clinic shall dismiss from state-aid all cases which fail to show reasonable progressive improvement under treatment.

19. Authorized Costs:

No costs other than those herein authorized will be paid from State Funds. All charges made must be substantiated by clinical record.

Approved by the Medical Association of Georgia Advisory State Board of Health Committee, June 19, 1939.

Control of Communicable Diseases

For rules and regulations on control of communicable diseases see separate bulletin: "Official Bulletin on the Control of Communicable Diseases—1948." Adopted by State Board of Health on April 15, 1948.

Regulation Governing the Use of Hatters' Mercurial Carroting Solutions

Section 1. Definitions: For the purpose of carrying out the provisions of these regulations the following terms are defined:

Hatters' Fur is any animal fiber or other substance used in the manufacture of hats, which is treated or otherwise prepared by the process of, or, in a manner similar to that of carroting.

Carroting is the process of treating hatters' fur with mercury nitrate or any other solution or material for the purpose of rendering the hatters' fur suitable in the manufacture of hats.

Mercurial carrot is any solution or material containing mercury or its compounds in combination with nitric acid or other materials and used in the carroting or preparation of hatters' fur.

Section 2. Effective December 1, 1941, the use of mercurial carrot in the preparation of hatters' fur, or the use of mercurial carroted hatters' fur in the manufacture of hats, is prohibited:

Provided, That any hat manufacturer or fur cutter in this State having mercurial carroted hatters' fur on hand December 1, 1941, may use said fur until it is consumed.

Adopted by the State Board of Health on October 16, 1941.

Hospitals, Sanatoria . . . Outside of Municipalities, How Established.

GEORGIA LAWS 1910, AS AMENDED:

GEORGIA LAWS 1935

Section 1. *Cemeteries, etc., outside municipalities, how established.*—Be it enacted, that in all counties in this State having a population of one hundred twenty-five thousand (125,000) or more, and in adjoining counties, the board of county commissioners or single commissioner of roads and revenues, or, if there be no such board, the ordinary of said county, shall have the power to grant or refuse permission to establish outside of the limits of incorporated towns, cemeteries, hospitals, sanatoriums, homes for orphans, aged or infirm persons, or similar institutions.

Section 2. *Regulations.*—Said county authority as above stated may grant permission to establish such institutions under such regulations as they may deem proper for the public good.

Section 3. *Such institutions, not so established, may be abated as nuisances.*—No cemetery, or sanatorium, or hospital, or home for orphans, aged or infirm persons, or other similar institution of the character indicated in this Act, shall be established outside of the corporate limits of any town or city in said counties, without the permission of said county authority; and in the event any may be so established without obtaining said authority, then the parties so establishing same shall be guilty of a misdemeanor and such institution shall be subject to be abated as a nuisance.

Section 4. *Violations of regulations punishable.*—Should any such institution be established as herein provided and it should not abide the regulations provided by said county authority, the same may be subject to be abated as a nuisance, and the parties guilty of such violation shall be guilty of a misdemeanor. (Acts 1910, pp. 130-132; 1935, pp. 384-386.)

County Taxation—Hospitalization.

GEORGIA LAWS 1939.

Section 1. *Section 92-3701 of Georgia Code 1933 amended; Hospitalization.*—That from and after the passage of this Act Section 92-3701 of the Code of Georgia of 1933, be, and the same is hereby amended as follows: By adding an additional numbered sub-paragraph to said Code section to be numbered consecutively with the numbered sub-paragraphs of said Code Section as at present existing, reading as follows: To provide medical or other care and hospitalization for the indigent sick people of the County, not exceeding one mill. (Acts 1939, pp. 200, 201.)

Hospital Authorities Created.

GEORGIA LAWS 1941.

Section 1. *Hospital authorities law.*—This Act may be referred to as the “Hospital Authorities Law.”

Section 2. *Definitions.*—The following terms, whenever used and referred to in this Act, shall have the following respective meanings unless a different meaning clearly appears from the context:

(a) “Authority” or “Hospital Authority” shall mean any public corporation created by Section 4 of this Act. (b) “Governing Body” shall mean the elected or duly appointed officials constituting the governing body of cities, towns, municipalities or counties. (c) “Area of Operations” shall mean the area within the cities, towns or municipalities creating Authorities. (d) The word “Project” shall include hospitals, sanitoriums, dormitories, clinics and housing accommodations or other public buildings for the use of patients and officers and employees of any institution under the supervision and control of any Hospital Authority and all utilities and facilities deemed by the Authority necessary or convenient for the efficient operation thereof. (e) “Participating Units” or “Participating Subdivisions” shall mean cities, towns, or municipalities or counties acting together for the creation of an Authority. (f) “Resolution” shall mean the resolution or ordinance to

be adopted by governing bodies pursuant to which authorities are established.

Section 3. *Hospital authority created.*—There is hereby created in and for each county and municipal corporation of the State a public body corporate and politic to be known as “the hospital authority” of such county or municipal corporation, which shall consist of a board of not less than five nor more than nine trustees, to be appointed by a governing body of such county or municipal corporation for such term as may be authorized by the resolution hereinafter provided for. No such authority shall transact any business or exercise any powers hereunder until the governing body of the county or municipal corporation shall, by proper resolution, declare that there is need for an authority to function in such county or municipal corporation. Any two, or more, cities or counties, towns or municipalities, by a like resolution by their respective governing bodies, may authorize the exercise of the powers herein provided for by an authority with respect to which the area of operation shall be confined to such participating units.

Whenever by virtue of the foregoing any two or more cities or counties, towns, or municipalities, by a like resolution by their respective governing bodies shall authorize the exercise of the powers herein provided for by an authority with respect to which the area of operation shall be confined to such participating units, such authority shall consist of a board of not less than five trustees, and the maximum number of trustees for such an authority may not be greater than nine plus the number of participating units in excess of one in such authority and not more than nine trustees, if any, may be from any one participating unit, the trustee or trustees for a participating unit to be appointed by the governing body of said participating unit, and the total number of trustees and number of trustees appointed by each participating unit within the aforesaid limits to be fixed by a like resolution by the respective governing bodies of such participating units.

Section 4. *Organization.*—The trustees shall be residents of the participating units comprising the authority, but their successors shall be appointed as provided for by such resolution. The trustees shall elect one of their members as chairman and another as vice-chairman and shall also elect a secretary and treasurer, who need not be a trustee. The trustees shall receive

no compensation for their services, but shall be reimbursed for their actual expenses incurred in the performance of their duties. The Authority shall make rules and regulations for its government and may delegate to one or more of its members or its officers, agents and employees such powers and duties as may be deemed necessary and proper. Such authority shall have perpetual existence as hereinafter provided.

Section 5. *Governmental functions; Powers of boards.*—Every Authority shall be deemed to exercise public and essential governmental functions and shall have all of the powers necessary or convenient to carry out and effectuate the purposes and provisions of this Act, including, but without limiting the generality of the foregoing, the power: To sue and be sued; to have a seal and alter the same; to make and execute contracts and other instruments necessary to exercise the powers of the Authority; to acquire, lease and operate hospital projects and to provide construction, reconstruction, improvement, alteration and repair of any such project and to lease and rent for any number of years any lands, buildings, structures or facilities in any existing or hereafter establish hospital project and to establish rates and charges for the use of the services of the Authority; accept gifts, grants or devices of any property; to acquire by the exercise of the right of eminent domain any property essential to the purposes of the Authority; to sell, lease, exchange, transfer, assign, pledge, mortgage or dispose of any real or personal property or interest therein; to mortgage, pledge, assign any revenues, incomes, tolls, charges or fees received by the Authority, to issue certificates of indebtedness for the purpose of providing funds for carrying out the duties of the Authority, provided such certificates shall not extend beyond a period of thirty years from the date of issuance thereof and provided further that such certificates shall be repayable from the revenues realized from the project or any part thereof; borrow money for any corporate purposes; to appoint officers, agents and employees; to make use of any facilities afforded by the Federal Government or any agency or instrumentality thereof; and to exercise any and all powers now or hereafter possessed by private corporations performing similar functions.

The Authority, acting through its trustees, shall have the right and power to establish a pension system of retirement

pay for all employees of said Authority and to use any funds coming to said Authority, from whatever source, for such purposes. In connection with such pension system and/or system of retirement pay, the Authority shall have the right to give consideration to the length of service of any employee of existing hospital facilities of political subdivision where such hospital facilities are acquired by purchase, lease, or otherwise, by the Authority.

Section 5(a). Employees of the Authority shall serve during good behavior and shall be removed only for cause, to be judged by the trustees, after hearing where requested in writing by the employees within fifteen days after date of discharge. The Board of Trustees shall have the power and authority to subpoena witnesses, compel the production of documentary evidence and to swear witnesses.

Section 6. *Eleemosynary*.—No Authority shall operate or construct any project for profit, and shall fix rates and charges consistent with this declaration of policy and such as will produce revenues only in amounts sufficient together with all other funds of the Authority to pay principal and interest on certificates and obligations of the Authority; to provide for maintenance and operation of the project and to create and maintain a reserve sufficient to meet principal and interest payments due on any certificates in any one year after the issuance thereof and to provide reasonable reserves for the expansion of the facilities or services of the Authority.

Section 7. *Revenue anticipation certificates; Hypothecation; No personal liability; Not debt*.—Every Authority is hereby authorized to provide by resolution for the issuance and sale of negotiable revenue anticipation certificates, for the purpose of paying all or any part of the cost of the acquisition, construction, alteration, repair, modernization and other charges incident thereto in connection with any facilities or project as herein defined, and shall likewise have power to issue refunding certificates. Such Authorities may issue such types of certificates as may be determined by the board of trustees of such Authority, including certificates on which principal and interest are payable: (a) exclusively from incomes or revenues of the operation of the Authority financed with the proceeds of such certificates or together with such proceeds and grants

from the Federal Government or any instrumentality or other person or corporation in aid of such projects; (b) exclusively from income and revenues of certain designated projects; or (c) from revenues of the Authority generally. Any such certificates may be additionally secured by the hypothecation of any revenues received from participating units or subdivisions and by mortgages of the project or any part thereof constituting real or personal property of the Authority, except as prohibited by law.

Neither the trustees of an Authority nor any person executing certificates on behalf of an Authority shall be personally liable thereon by reason of the issuance thereof. The certificates and other obligations of an Authority shall not be, and shall so state on the face thereof, a debt of the city, the county, the State of Georgia or any political subdivision thereof nor of any combination of sub-divisions acting jointly as hereunder provided. Certificates of an Authority are declared to be issued for an essential public and governmental purpose and, together with interest thereon and income therefrom, shall be exempt from all taxes.

Section 8. *Maturity and interest; Execution.*—Certificates of an Authority shall be authorized by its resolution and may be issued in one or more series and shall bear such date or dates, mature at such time or times, bear interest at such rate or rates, not exceeding four per centum (4%) per annum, be in such denomination or denominations, be in such form, either coupon or registered, carry such conversion or registration privileges, have such rank or priority, be executed in such manner, be payable in such medium of payment, at such place or places, and be subject to such terms of redemption (with or without premium) as such resolution, its trust indenture or mortgage may provide, and in case any of the trustees or officers of the Authority whose signatures appear on any certificates or coupons shall cease to be such trustees or officers before the delivery of such certificate, such signatures shall nevertheless be valid and sufficient for all purposes.

Section 9. *Pledges; Procedure prescribed; Default, trustee.*—Obligations of an Authority evidenced by certificates and trust indentures and mortgages executed in connection therewith may contain such provisions not inconsistent with law as

shall be determined by the board of trustees of the Authority and the Authority may be in such instruments provide for pledging of all or any part of its gross or net fees, tolls, charges, revenues and incomes and mortgaging of all or any part of its real or personal property and covenant against pledging any or all of its income, revenues, tolls, charges or fees and to further provide for the disposition of proceeds realized from the sale of any certificates and for the replacement of lost, destroyed or mutilated certificates and necessary provisions as to payment and redemption of such certificates. Undertakings of an Authority may likewise prescribe the procedure by which certificate holders may enforce rights against the Authority and provide for such rights upon breach of any covenant, condition or obligation of the Authority. Trust indentures, mortgages or deeds to secure debt executed by an Authority may provide that, in the event of default by the Authority in the payment of principal and interest on certificates or obligations or breach of any covenant, a trustee or trustees appointed under the terms of the indenture, mortgage or deed to secure debt, which shall be a bank or trust company authorized to exercise trust powers, may take possession and use, operate and manage any project mortgaged as security for the repayment of any indebtedness of the Authority and provide the terms and conditions upon which the trustee or trustees or holders of certificates may enforce any right relating to such certificates. Such trust indentures, mortgages and deed to secure debt may contain such provisions as may be deemed necessary or desirable by the Authority not inconsistent with law.

Section 10. *No power to tax; May be levied by counties and towns; Contracts with cities and counties.*—An Authority shall have no power to tax, but upon the adoption of the resolution by the governing body or bodies of participating units or subdivisions as herein provided and the execution of a contract for the use of facilities or services of the Authority by political subdivisions or participating units as hereinafter authorized, provisions shall be made annually by such participating units or political subdivisions contracting with an Authority for the payment for the services or facilities of the Authority used by the participating units or subdivisions or the residents thereof out of general funds of the participating unit or subdivision or out of tax revenues realized for the purpose of providing medical care or hospitalization for the indigent sick and poor. For

the purpose of providing such tax revenues there is hereby authorized to be levied an ad valorem tax not exceeding five mills exclusive of all other taxes which may be levied by counties or by cities or towns which have executed contracts with hospital authorities, from which revenues when realized there shall be appropriated annually sums sufficient to pay for the cost of the use of the services and facilities of Authorities by participating subdivisions or the residents thereof pursuant to the contract between such participating units and subdivisions and an Authority. For the purpose of using such facilities any city, town, municipality or county is hereby authorized by action of its governing body to enter into contracts with an Authority for such periods of time not exceeding thirty years as shall be necessary to provide for the continued maintenance and use of the facilities of an Authority; sums due and payable under such contract shall be determined from year to year during the period of such contract and no sums shall be paid for the services in excess of the amounts necessary to provide for the maintenance and operation of projects of Authorities and such sums as shall be necessary to provide adequate and necessary facilities for medical care and hospitalization of the indigent sick and poor, including reasonable reserves necessary for expansion and necessary for the payment of the cost of facilities of the project; the contracts herein authorized to be entered into between cities, towns, municipalities or counties or any combination thereof with Authorities may provide for the conveyance or lease of any existing hospital facilities or projects as herein defined to an Authority created by any such cities, towns, municipalities or counties for a nominal consideration only, provided that such conveyance shall contain a clause providing that upon dissolution of the Authority and providing further shall revert to the city, town, municipality or county conveying the same to the Authority and providing further that no property so conveyed may be mortgaged or in any way given as security for an indebtedness of the Authority; this limitation, however, is not to be construed as limiting the right of the Authority to pledge or hypothecate revenues which may be realized by the Authority from the operation of any property so conveyed to the Authority. Any property conveyed or leased to an Authority by cities, towns, municipalities or counties shall be operated by the Authority to which the same is conveyed together with other facilities of the Authority in

accordance with and under the provisions of this Act and the resolution of the governing body or bodies of participating units. Should an Authority, acquire by purchase existing hospital facilities of political subdivisions and pay the reasonable value therefor, nothing in this Act shall be construed to prevent the hypothecation or mortgaging of such facilities as security for the repayment of any indebtedness which may be legally incurred by such Authority.

Section 11. *General obligations.*—Obligations of Authorities other than certificates shall be payable from general funds of an Authority and shall at no time be a charge against any special fund allocated to the payment of certificates except upon payment of current annual maturities and reserves hereinbefore required to be created. Such obligations, except certificates, shall be payable each year.

Section 12. *Validation.*—Certificates of an Authority shall be confirmed and validated in accordance with the procedure of the Revenue Certificate Law of 1937, as amended, and when validated the judgment of validation shall be final and conclusive with respect to such certificates and against the Authority issuing the same.

Section 13. *Dissolution.*—By joint action of the board of trustees of an Authority and the governing bodies of participating units, Authorities created under and pursuant to the terms of this Act may be dissolved, provided no such dissolution shall in any way impair the rights of third persons or the contracts of the Authority with such third persons. Disposition to be made of the property of the Authority upon dissolution shall be covered in any resolution adopted by participating units and the board of trustees of the Authority. At no time, however, shall any Authority upon dissolution convey any of its property except as may be otherwise authorized by law to any private person, individual, association or corporation.

Section 14. *Reports.*—The board of trustees of each Authority created hereunder shall file an annual report on forms prescribed by the State Auditor with the governing body or bodies of political subdivisions or participating units of the activities of the Authority for the years and shall annually consider and adopt as a part of such report a budget, which budget shall be

filed with the annual report. The board of trustees may hold a public hearing on the budget and representatives of any governing body within the area of operation of the Authority or any other person having an interest in such budget shall be admitted to such hearing with the right to be heard with respect to any matter covered by the report of the board of trustees or by the budget.

Section 15. *Severability.*

Section 16. *Construction.*—This Act being necessary for the welfare of the citizens of the State shall be liberally construed to effect the purposes hereof and insofar as the provisions of this Act may be inconsistent with the provisions of any other law, whether by charter of any political subdivision of the State or otherwise, this Act shall be controlling. (Acts 1941, pp. 241-250; Acts 1945, pp. 349-350; Acts 1949, pp. 1141-1143.)

Hospital Authorities—Investment of Surplus Monies.

GEORGIA LAWS 1947.

Section 1. From and after the passage of this Act, the several Hospital Authorities of the State of Georgia created by and under "Hospital Authorities Law" (Ga. Laws 1941, pages 241-250) Section 99-1501-15-22 inclusive Code of Ga. Annotated 1945 Cumulative Pocket Part, be, and are hereby authorized and empowered to invest all monies, or any part thereof received by them through the issuance and sale of revenue certificates of the authorities, or from contributions or gifts received by the authorities, which cannot be immediately used for the purpose for which received, in any security or securities which are legal investments for sinking fund purposes, provided however that such investments in such securities will at all times be held for and when sold used for the purposes for which the money was originally received and no other. (Acts 1947, pages 1138-1139.)

Hospital Regulation Law.

GEORGIA LAWS 1946.

Section I. In addition to the powers and duties now vested in and imposed upon the State Board of Health by existing laws, the said Board shall have power and authority to make and promulgate reasonable rules and regulations for the protection of the health and lives of inmates and patients of hospitals, sanatoria, infirmaries, maternity homes, nursing homes and other institutions where persons are received for treatment, examination, maternity care or nursing care in this state, except that such authority shall not include the offices of physicians or others practicing the healing art unless more than one bed are provided in such offices for overnight care of patients. The Board after consulting with an advisory committee appointed as provided in Section 2 of this Act shall adopt and promulgate all such reasonable rules and regulations which in its judgment are necessary to protect the health and lives of said inmates and patients and shall prescribe and set out the kind and quality of building, equipment and hospital facilities which every hospital in this state shall have and use in order to properly care for its patients. The State Board of Health may classify or grade the hospitals, sanatoria, infirmaries, maternity homes, nursing homes and other institutions where persons are received for treatment, examination, maternity care or nursing care in this state, and make and promulgate rules and regulations that apply to such institutions according to the type of services rendered in the institution.

Section II. There shall be established a hospital advisory committee to advise with the State Board of Health on the policies and rules and regulations necessary for carrying out the purposes of this Act. The membership of this committee shall consist of three hospital administrators or persons with broad experience in hospital administration appointed by the Georgia Hospital Association, five members appointed by the Medical Association of Georgia, one member appointed by the Georgia Nursing Association, one member appointed by the Georgia Dental Association, five lay members with broad civic interests representing the various segments of the population appointed by the Governor, the Director of the State Department of Public Health, the Director of Public Welfare, the Attorney Gen-

eral, and the State Auditor. If any one of the above associations fails or ceases to function, then the Governor shall appoint representatives from these groups. When the first appointments are made, the Georgia Hospital Association shall appoint one member for a term of one year, one member for a term of two years, and one member for a term of three years. The Medical Association of Georgia or its Board of Councilors shall appoint one member for a term of one year, two members for a term of two years, and two members for a term of three years. The member appointed by the Georgia Dental Association and the member appointed by the Georgia Nursing Association shall be appointed for a term of three years. The Governor shall appoint one lay member for a term of one year, two for a term of two years, and two for a term of three years. After the expiration of the first appointments, all terms shall be for three years. The Director of the State Department of Health, the Director of Public Welfare, the Attorney General and the State Auditor terms shall expire with their terms of office, and their successors in office shall succeed them as members of said committee. Vacancies in the membership of said committee shall be filled in the same manner as the original appointments. The Director of the State Department of Public Health shall act as chairman of the advisory committee.

The Hospital Committee shall meet at the call of the Chairman or at the request of five of its members. No meeting shall be called without timely written notice being given the members either by mail or by wire of the date set for the meeting. Seven members of the Committee shall constitute a quorum for the transaction of any and all business. All members shall be paid all expenses incurred in carrying out the functions and duties of the committee, and all members except those employed by the State of Georgia shall receive \$10.00 per day for each day they are engaged in their duties as committeemen. The per diem and expenses above contemplated shall be paid from the appropriations made and to be made for the State Department of Public Health, or from such other funds as the Chairman of the Budget Commission shall direct.

Section III. Within six months after the State Board of Health shall have adopted the rules and regulations provided for in Section I of this Act, all persons operating or in charge of any hospital, sanatorium, infirmary, maternity home, nurs-

ing home or similar institution shall file an application for a permit to operate the same on a form to be supplied by the State Board of Health, and thereafter no hospital, sanatorium, infirmary, maternity home, nursing home or similar institution shall operate in Georgia without a permit issued by the State Board of Health. Such permit shall at all times be prominently displayed in a conspicuous place in the building.

The State Board of Health may refuse to grant a permit as provided for above to any applicant who does not possess the reasonable minimum requirements which the Board may prescribe. The Board may revoke any such permit in the event such operator violates any of the reasonable rules and regulations of the State Board of Health, or ceases or fails to have the reasonable facilities prescribed by the Board, or violates any of the penal laws of the State.

All such permits issued for the operation of the institutions above mentioned shall be renewed on January 1 of each year.

Section IV. Any person who is refused a permit, or whose permit is revoked, may appeal to the courts as in other cases provided by law.

Section V. The State Board of Health is hereby authorized to allocate to and deliver to any State Hospital Authority, or to any hospital authority which has been or which may be hereafter created by or under authority of any Act passed by the General Assembly of Georgia for any county or municipal corporation of this State, any funds made available to the State Board of Health by the Federal Government, the state or any of its political subdivisions, or from any other source, provided, however, it shall be the duty of the Board of Health to expend all funds in accordance with any special appropriation or direction from the General Assembly of Georgia or the Federal government, or the donor of any funds. The State Board of Health shall have the power and authority to prescribe the purposes for which any such funds may be used by any such hospital authority.

Section VI. The provisions of this Act shall not apply to any hospital operated exclusively by the Federal Government or any of its agencies.

Section VII. Any person who knowingly or wilfully violates this Act or any portion thereof shall be guilty of a mis-

demeanor, and upon conviction therefor shall be punished as for a misdemeanor.

Section VIII. Severability.

Section IX. This Act shall not become effective or operative in any respect as to any provisions herein contained unless and until funds have been made available to the State Board of Health for the purposes herein enumerated by the Federal Government, the State or any of its political subdivisions, or from any other source. (Acts 1946, pp. 34-39.)

Rules and Regulations for Hospitals

Definitions

The term "hospital", as used in these Rules and Regulations, means any institution which maintains and operates facilities for the diagnosis, treatment or care, over a period exceeding twenty-four hours, of two or more persons suffering from physical or mental illness and/or for providing obstetrical care over a period of more than twenty-four hours.

Where qualifying adjectives such as: Adequate, proper, safe, sufficient, satisfactory, suitable, etc., are used in these Rules and Regulations, they shall mean the standard of completeness, performance, propriety or safety that is being maintained by the better hospitals or related institutions as are then operating under permits granted by the State Board of Health.

HOSPITAL PLANT AND EQUIPMENT PRACTICES AND PROCEDURES WITHIN THE HOSPITAL

Construction of New Hospitals or Additions to Existing Hospitals

1. Any individual or group which proposes to build a new hospital or make material alterations or additions to existing facilities, shall submit the plans of such construction or alteration to the Georgia Department of Public Health for approval.

2. All construction and alterations shall be made in accordance with approved plans and with such standards as are hereinafter set forth or shall subsequently be adopted by the Geor-

gia State Board of Health. In approving the plans for new construction compliance with such of the standards as may not appear applicable to a particular project may be waived.

3. In order to avoid unnecessary expense and delay in changing plans, it is suggested that schematic plans of the proposed construction be submitted to the Division of Hospital Services, Georgia Department of Public Health for review.

4. Final plans submitted for approval shall show the general arrangement of the buildings, including fixed equipment and intended purpose of each room, with such additional information as the Georgia Department of Public Health may require. The above requirement also applies to systems of water supply, plumbing, sewerage, and garbage or refuse disposal.

Sound Construction and Good Repair

5. The hospital buildings shall be of sound construction and shall be kept in good repair at all times.

6. Buildings used to house patients shall be of such construction that no hazards to the life and safety of patients and personnel exist. Buildings shall be capable of withstanding the weight and elements to which they are or may be subjected. The buildings shall be maintained so that there are no leaky roofs or walls, loose plaster, uneven flooring, broken windows, faulty equipment and other undesirable conditions which may be placed in the category of poor maintenance. Heating equipment, electrical equipment and elevators shall be so constructed and maintained as to assure the safety of patients and personnel.

Fire Prevention

7. Buildings shall be approved by the local fire marshal or be in compliance with local and State fire regulations. If no fire regulations exist or are enforced by the local government or in case existing regulations do not include all the regulations hereinafter set forth, it shall be the responsibility of the owner or governing body of the hospital to see to it that no fire hazards, endangering the lives and safety of patients and personnel, exist in the hospital and that the following fire prevention regulations are observed.

8. All parts of the heating system shall be so constructed and maintained as to eliminate fire hazards. If the furnace or boiler room is located in a building in which patients are

housed, it shall be cut off from the rest of the building by use of fire-resistive material. Metal and asbestos protection shall be provided if steam pipes and hot water pipes are placed closer than two inches from woodwork.

9. Chimneys and stove pipes, if any, shall be thoroughly cleaned once a year. If stove pipes pass through closets or concealed places, pipes shall be properly insulated with approved fire-resistive material. All joints shall be riveted and properly supported.

10. No oil or gas heaters shall be used in rooms unless directly connected with a flue which opens to the outside air. All gas connections shall be made of metal. Rubber tubing shall not be used as a connection for gas heaters.

11. Laundry chutes and shafts shall be lined with fire-resistive material and have close-fitting doors, also lined with fire-resistive material. Such shafts shall not terminate in an attic. All elevator shafts shall be fire resistant.

12. All electrical work shall comply with local ordinances and codes and/or with the National Electrical Code and Standards of the National Board of Fire Underwriters.

13. Storerooms, basements, attic lockers, and closets shall be kept free from accumulated combustible refuse. Non-usable mattresses shall be destroyed, and stored mattresses shall be arranged in small piles with sufficient space for access to all sides of the mattress pile, or placed in a fire-resistant room.

14. Paints, varnishes, oils and other highly combustible materials shall be stored in buildings used for housing patients only if placed in properly vented, fire-resistant rooms. Proper precautions shall be taken in the handling of all highly combustible materials. Oily cloths shall be kept in closed, metal containers.

15. Adequate facilities for the notification of local fire-fighting forces shall be readily accessible.

16. An acceptable fire extinguisher shall be available for use on each floor. Essential personnel shall be given periodic instruction in the use of such equipment. Fire extinguishers shall be checked at six month intervals to see that they are in good working order at all times. A record of this inspection shall be recorded on a tag and attached to the extinguisher.

17. There shall be more than one means of egress leading to the outside of the building from each floor. Exits shall be lo-

ated as near to the opposite ends of the building as practicable. Exits shall be indicated by the proper lights and signs. Such exits shall not be locked from the inside.

18. Proper precautions in the handling of combustible, explosive anesthetics and oxygen shall be taken. Containers not in use should be stored in a building apart from that used to house patients.

Vapor-proof electrical outlets and conductive flooring shall be installed in the operating, delivery and emergency rooms or in any room in which gaseous anesthetics are used. High humidity shall be maintained in these rooms to reduce the possibility of static electricity initiating an explosion of anesthetic vapors.

Safety and Comfort of Patients and Personnel

19. Proper facilities, insuring the safety and comfort of patients and personnel, shall be provided.

20. The heating plant shall be adequate to maintain a temperature of 75 to 80 degrees Fahrenheit in severe weather in the nursery and operating rooms, and 70 degrees Fahrenheit in other rooms used for patients.

21. Each patient's room shall be an outside room with a satisfactory amount of natural light. It is recommended that the window area be at least one-eighth of the floor area.

22. Every room, including the storerooms and the attic, shall have sufficient artificial lighting facilities so that all parts of the room shall be clearly visible under such artificial lighting. Hallways, stairways, inclines and ramps shall be adequately lighted to prevent accidents. All service rooms and work centers such as medicine cabinets and nurses' charting desks shall be adequately lighted.

23. Emergency lighting facilities shall be provided and distributed so as to be readily available to the personnel on duty in the event of a power failure. This emergency equipment shall be periodically inspected to see that it is maintained in good working order. Flashlights and battery operated lamps are suggested. Open flame type lamps shall not be used.

24. The hospital buildings shall be adequately ventilated at all times. Kitchens, bathrooms and service rooms should be so located and ventilated by windows or mechanical means as to

prevent offensive odors from entering patients' rooms and public corridors.

25. All stairways shall be provided with handrails and shall have a clearance of 48 inches. All open stairways shall be protected with guardrails.

26. Rooms extending below ground level shall not be used for patients unless such rooms are dry, well ventilated and otherwise suitable for occupancy.

27. Rooms shall be of sufficient size to allow not less than 80 square feet of floor space per patient in wards with at least there and one-half feet between beds and 100 square feet of floor space in private rooms. Doors to patient rooms shall be at least three feet ten inches wide in order to permit easy removal of occupied beds.

28. Corridors shall be at least eight feet wide.

29. A comfortable bed, with sufficient clean bedding and bed linen shall be provided for each patient.

30. Sufficient storage space shall be provided for the personal belongings of each patient.

31. In case two or more patients occupy the same room, privacy shall be secured by means of screens or curtains.

32. Signals shall be provided at each bed so that the patient can summon the attendant on duty.

33. Toilet facilities, in reasonable ratio to the number and sex of the patients cared for, and located conveniently to patients' rooms, shall be provided.

34. Insofar as possible, quiet shall be maintained in the patient area.

35. Facilities for the preparation and serving of palatable and appetizing meals for patients shall be provided.

Transportation and Communication

36. There shall be proper means of transportation and communication to and from the hospital.

37. The hospital shall be served by a good road, kept passable at all times. Public transportation facilities should be available. Adequate parking space for private automobiles should be provided.

38. Telephone connection with the local exchange shall be provided. Adequate facilities for intramural communication shall be available.

Cleanliness and Sanitation

39. Proper facilities for sanitation shall be provided throughout the hospital buildings and premises for the purpose of insuring cleanliness and protection against infectious diseases.

40. The walls and floor of the hospital shall be of a character to permit frequent washing, cleaning or painting. Trim, moulding and baseboards of wood should be avoided because of the difficulty of cleaning.

41. The construction, maintenance and housekeeping of the hospital shall be such as to prevent the entrance and harborage of rats, other rodents, and insects.

42. The water supply shall be of safe, sanitary quality, suitable for human use, and the supply system shall be approved by the Georgia Department of Public Health. The water shall be distributed to conveniently located taps throughout the buildings. Hot water shall be available at all times.

43. Sewage shall be discharged into a municipal sewerage system, where such a system is available; otherwise, the sewage shall be collected, treated and disposed of in an independent sewerage system which is approved by the Georgia Department of Public Health.

44. The plumbing and drainage, or other arrangements for the disposal of excreta and infectious discharges and institutional wastes shall be in accordance with local codes and the standards approved by the Georgia Department of Public Health.

45. All garbage shall be disposed of in a manner which will not permit the transmission of disease, create a nuisance or provide a breeding place for flies. All containers for garbage shall be water-tight, have tight-fitting covers, be rodent-proof and be kept in a sanitary manner.

46. All outside doors, windows, and other openings shall be screened with wire screen or its equivalent with not less than sixteen meshes per lineal inch. All screen doors shall open outward and be equipped with self-closing devices.

47. Incineration facilities or other approved methods for the disposal of infected dressing, surgical and obstetric wastes, and other similar material shall be provided.

48. All handling of food shall conform with the ordinances and codes regulating eating and drinking establishments rec-

ognized by both the U. S. Public Health Service and the Georgia Department of Public Health.

49. Storerooms for food storage shall be clean and well ventilated. All food shall be stored so as to be protected from dust, flies, rodents, vermin, unnecessary handling, droplet infection, overhead leakage and other sources of contamination.

50. In places where food is stored, prepared or consumed, all poisonous chemicals and other sterilizing or rodent or insect poisoning materials shall be properly labeled, stored properly, and so handled as to avoid danger of poisoning humans.

51. Each hospital shall have laundry facilities or make provision for the proper cleansing of linen and other washable goods. In case linen is sent to a commercial laundry, it is recommended that the superintendent or a responsible member of the administrative staff inspect such laundry from time to time.

52. All multi-use utensils used for eating, drinking and in the preparation or serving of food shall be effectively cleaned and disinfected after each usage. Gross food particles should be removed by careful scraping and prerinsing in running hot water. Brushes, baskets or sprays are suggested. The dishes should be thoroughly washed in hot water 110 to 120 degrees Fahrenheit using an adequate amount of effective soap or detergent. Following this, the utensils should be rinsed in hot water to remove soap, and disinfected by one of the following methods:

a. Immersion for at least 2 minutes in clean water at 170 degrees Fahrenheit.

b. Immersion for at least one-half minute in boiling water.

c. Immersion for at least 2 minutes in a luke warm chlorine solution containing at least 50 parts per million of available chlorine. Chlorine is *not* recommended for silverware. Cleansing of silver should be done using either (a) or (b) above.

Steam or hot water cabinets can be made effective. Results obtained with dishwashing machines should be equal to those obtained by the methods outlined above. After disinfection, the utensils should be allowed to drain and dry in racks or baskets on non-absorbent surfaces. Drying cloths should not be used. Dishes should be stored in closed cupboards for protection against dust and moisture.

53. Glass-filling devices shall be constructed so as to prevent

any contact of the upper one-third of the glass with the device, and in addition, so that no portion of the device extends into the glass.

54. All ice used in contact with food or drink shall be from a satisfactory source and handled and dispensed in a sanitary manner.

55. The milk supply shall meet local, State, and Georgia Department of Public Health requirements.

56. Hand-washing facilities, of the proper type, shall be provided throughout the hospital, including operating, delivery and emergency rooms, labor rooms, examining and treatment rooms, main and diet kitchens, utility and other service rooms, toilet rooms, nurseries, and rooms used for the isolation of patients. Soap, running water, and an adequate supply of towels shall be provided. The use of a common towel is prohibited. Lavatories in patients' rooms and wards are desirable.

57. There shall be provision for the proper sterilization of dressings, utensils, instruments and water. The hospital should adopt a recognized method of checking sterilizer performance, such as thermocouple indicators connected to a constant recording instrument, use of a fusing control in the largest package of each load or the bacteriological examination, at frequent intervals, of sterilized dressings. A cabinet or other suitable enclosure should be provided for keeping sterile equipment in a clean, convenient and orderly manner. Special precaution should be taken so that unsterile and sterile supplies are not mixed.

58. Adequate refrigeration facilities shall be provided throughout the hospital. Perishable food should be kept at a temperature below 50 degrees Fahrenheit in order to prevent deterioration. It is suggested that there be a reliable thermometer in each refrigerator. Biological and other drugs requiring refrigeration should be kept at the proper temperature as recommended by the pharmacopeia or the manufacturer. Food and drugs should not be kept in the same refrigerator unless the drugs are properly protected against mold formation.

59. All facilities used in the care of patients shall be kept clean and sanitary, and in good order. Proper housekeeping standards shall be maintained throughout the hospital.

Facilities for Services Offered
General Nursing

60. Sufficient equipment for nursing care, according to the type of patients accepted by the institution, shall be available.

61. A sufficient number of wash basins, mouthwash cups, urinals and bedpans for the use of each individual patient shall be provided or such utensils shall be disinfected after each using. Bedpan covers shall not be used interchangeably.

62. A sufficient number of clinical thermometers shall be available to permit adequate disinfection before using.

63. Hot water bags shall be covered and the temperature of the water carefully checked before placing in beds. Greatest care should be exercised to see that hot water bags do not leak. Electric heating pads shall be periodically checked by a qualified electrician.

64. Restraints shall be applied only when they are necessary to prevent injury to the patient or to others, and shall be used only when alternate methods are not sufficient to accomplish these purposes. In applying restraints, careful consideration shall be given to the methods by which they can be speedily removed in case of fire or other emergency. Doors to patients' rooms shall be locked only when absolutely necessary and the type of lock used shall be such that can be easily opened from the outside in case of emergency.

65. Utility rooms shall be outside rooms with adequate lighting and ventilation. They should be conveniently located for the efficient conduct of work. There shall be adequate space and facilities for the proper cleansing and storage of nursing supplies and equipment.

66. Suitable provision shall be made for the preparation of medications and treatments.

67. All medicines, poisons, and stimulants shall be plainly labeled and stored in a cabinet or storeroom accessible only to nursing personnel. Cabinets in which narcotics are stored shall, according to the Federal Narcotic Regulations, be securely locked and accessible only to the person in charge of the nursing unit. Remaining portions of compounded medications shall be destroyed after the patient for whom the drug preparation was ordered has been discharged.

68. The hospital shall make provision for the isolation of

contagious and communicable disease patients. Many hospitals do not have specialized contagious disease departments, but do find it necessary from time to time to care for patients with contagious diseases. Isolation rooms shall have adjacent lavatories and toilets and be located either at the end of a corridor or off a sub-corridor. There should be adequate facilities for cleansing bedpans and other equipment. A separate utility room, equipped with sink and utensil sterilizer should be provided.

69. The nursing staff shall compare favorably with that of the better hospitals throughout the State of Georgia, and conform with generally accepted standards. The needs of the hospital will determine the number of nurses to be employed. Data on personnel requirements for various size hospitals is available at the Division of Hospital Services.

Surgery

70. If the hospital provides surgical service, adequate operating rooms, surgical facilities and equipment shall be provided. An emergency room, readily accessible to the ambulance entrance of the hospital, equipped to handle minor surgery, dirty cases, and first aid should be provided in addition to the operating suite.

71. The operating suite shall be so located as not to be used as a passageway between other parts of the hospital and should not be subject to contamination from other sections of the institution.

72. The operating rooms shall be of sufficient size to accommodate the personnel and equipment needed and allow for good technique. They shall have impervious floors and washable walls. There shall be a satisfactory means of illumination of the operative field as well as general illumination.

73. There shall be facilities for hand-scrubbing, preferably in a separate room, with running hot and cold water delivered through spray faucets and controllable without the use of hands. Sinks should be designed to make it possible to wash hands easily, comfortably and without breaking technique. Some points to be observed are:

- a. Sink should be at the proper height from the floor.
- b. Faucets should be high enough to permit easy hand-washing under running water without touching the sides of the basin.

c. Running water should be controlled with a foot, elbow, or knee device.

d. A mixing valve should furnish water at not more than 180 degrees Fahrenheit at the faucet.

74. An acceptable aseptic technique shall be observed in all major and minor operative procedures. Proper care shall be taken to prevent contamination of the surgical field, sterile tables, or operating team by visitors. After use, the operating room shall be thoroughly cleansed in a manner adequate for the type of contamination existing.

75. The operating room shall be under the supervision of a graduate, registered nurse when available.

76. Hospitals providing surgical service shall have available facilities for the pathological examination of tissue specimens, either on the premises or by arrangement through affiliation, or other means, with a competent pathological laboratory.

77. Sterilization facilities should be located adjacent to the operating room. This should be in addition to central sterilizing, for rapid sterilization of instruments is often required. These facilities should include a high speed pressure sterilizer and a water sterilizer.

Obstetrics

78. It is recommended that maternity patients be cared for in a segregated part of the hospital into which other patients shall not be admitted. If it is necessary to place maternity patients in rooms previously occupied by other patients, rooms and furnishings shall be thoroughly cleansed before being so used.

79. Facilities for the examination and preparation of patients as required by the attending physician shall be provided.

80. Immediate segregation and isolation of all mothers with infection, fever, or other conditions inimical to the safety and welfare of others shall be provided in a separate room.

81. Satisfactory provision shall be made for the patient in labor, either in the patient's room or a designated special labor room. Rooms for this purpose shall afford privacy, be conveniently located with reference to the delivery room, and be either sound-proofed or so located as to minimize the possibility of sound reaching other patients' rooms.

82. It is recommended that a special room be equipped as a delivery room. The delivery room should not be used for any other purpose, and should be used only for the delivery of non-infected patients. Patients with any evidence of infection or possible infection should be delivered in a separate room.

83. Delivery rooms shall be furnished with suitable stands for instruments, utensils and necessary supplies. An adequate supply of utensils and sterile linens, dressings, gloves and face masks shall be in readiness at all times. There shall be a suitable delivery table equipped for operative deliveries and the treatment of shock. The pad shall be protected with waterproof sheeting in good condition.

84. If the maternity service is very small, it is permissible to use the patient's room for delivery, provided such room affords reasonable privacy, can be satisfactorily set up for delivery, and is thoroughly cleaned before use. The above requirements covering equipment and supplies for the delivery room also apply to deliveries performed in the patient's room.

85. Sterile equipment for administration of blood transfusions and paranteral therapeutic solutions shall be readily available. There shall be available at all times equipment for general anesthesia, and a minimum of drugs and anesthetics ordinarily needed for such use.

86. The operating room shall not be used for delivery with the exception of Caesarean section or other contemplated operative procedure.

87. A stretcher shall be provided for returning the patient to her own room.

88. It is desirable that nurses caring for other patients shall not care for maternity patients. When necessary for the same nurse to care for both maternity and non-maternity patients, special precautions should be employed in giving nursing care.

89. If a nursery is provided, it shall be used for no purpose other than the care of newborn infants. The nursery shall be an outside room, so located as to receive sunlight some portion of the day. The nursery should be on the same floor as, and conveniently located with reference to, the mothers' rooms. All-activity rooms (combined sleeping and bathing rooms) shall have sufficient floor area to permit spacing of bassinets at least six inches apart, plus adequate space for necessary sup-

plies and equipment and for giving nursing care. There shall be ample space between rows of bassinets.

90. It is recommended that the total nursery space be divided into units in order to segregate the routine activities, such as preparation for work in the nursery, bathing and dressing of infants, preparation of feeding, or examination by physicians. In existing nurseries, where such division of space into unit rooms is not currently feasible, facilities and equipment may be arranged to permit separation of the several nursery activities by areas of the room. A glass observation window is recommended. Shades, screens or venetian blinds are suggested to shield infants from view during care or examination.

91. There shall be no less than sixteen square feet of floor space per bassinet in the nursery. The nursery shall be provided with a reliable room thermometer near the bassinets and at approximately bassinet level. Dry sweeping or dusting shall not be done in the nursery.

92. An instrument for measuring humidity is desirable in the nursery, especially in the sleeping rooms. If the air is too dry, means should be provided for maintaining desirable humidity.

93. Glass deflectors, or other effective window ventilators, are recommended as protection against dust and drafts. Acoustical ceiling treatment is recommended unless the nursery is in a separate wing, or otherwise well separated from rooms of patients.

94. A heated bassinet, crib or incubator shall be provided for the reception of each newborn infant. Incubators suitable for the care of premature infants shall be provided in the ratio of one incubator to twenty bassinets or fraction thereof. A separate bassinet shall be provided for each infant. Freshly laundered linings, blankets and linen shall be furnished each new occupant. Bassinets shall have firm and tightly fitting mattresses, covered with waterproof sheeting and washable pads. Washable inside linings shall be provided to obviate danger of injury to infants from bassinet bars, and as a preventive measure against the transmission of disease.

95. Electric heating pads shall not be used in bassinets.

96. In case a common bathing table is in use, sterile pads shall be used to protect the infant. Each pad shall be sterilized or destroyed after use. If basins are used, a separate one shall

be provided for each infant or the basin shall be sterilized after each use.

97. Covered cans for soiled linen shall be provided and emptied at frequent intervals. It is inadvisable for diaper rinsing to be carried on in the nursery. Nursery linen should be washed separately from other hospital linen, and care taken to avoid contamination of freshly laundered articles. Clean receptacles only shall be used to return nursery linen to the maternity department.

98. A sufficient number of rectal thermometers shall be provided in the nursery to permit adequate disinfection before using.

99. There shall be space and equipment for the preparation of milk mixtures and for their sterilization as near the nursery as possible. Bottles, nipples and utensils used in the preparation of milk mixtures shall be thoroughly washed and sterilized before each use. Refrigeration shall be provided as near the nursery as possible. It is advised that all milk not canned or powdered be boiled.

100. It is recommended that infants' clothing be furnished by the hospital. If infants' clothing is furnished by the mothers, precaution shall be taken to avoid introduction of vermin or infection into the nursery. Freshly laundered or destroyable diapers only should be used and should be available in necessary quantity.

101. Silver nitrate ampules for the prevention of infant blindness shall be kept on hand and instillation of silver nitrate solution (1%) shall be done before the infant is removed from the delivery room. (See Section 88-420, Georgia Code of 1933.) When requested, these ampules are furnished by the Georgia Department of Public Health.

102. Every infant shall be marked for identification by one of the reliable methods in common use, such as tape or name beads. Information shall be sufficient to identify infant with one and only one mother. If written tags are used, the ink shall be waterproof. Marking for identification shall be done immediately after delivery before the infant is removed from the delivery room, and the tag placed on the infant where it may be easily referred to whenever the infant is removed from his bassinet. The tag shall be removed only by the mother or

by a responsible person in the presence of the mother, at the time the infant is dressed to go home.

103. Immediate segregation and isolation of all infants with infections such as respiratory infections, skin rash and diarrhea shall be provided in a separate room or cubicle. All equipment shall be kept completely separate for each infant with infection. Infants born outside the hospital shall be isolated for at least 72 hours after admission. A premature nursery shall be provided in case four or more premature bassinets are required.

104. Children should not be permitted to visit in the maternity section of the hospital.

105. If at the time of admission to the maternity section of a hospital, a blood test for syphilis has not been performed sometime during the current pregnancy of the patient, such test shall be performed within twenty-four hours. In the event that the mother delivers before a blood test is performed, a specimen of blood taken from the infant's cord at the time of delivery shall be tested for syphilis or such specimen shall be submitted to the Laboratory of the Georgia Department of Public Health for testing. Mailing outfits for submission of blood samples are furnished, on request, by the Georgia Department of Public Health, and a supply should be kept on hand for the convenience of the physician.

106. Each hospital shall establish definite nursing procedures for delivery room and nursery, and for the antepartum and postpartum care of patients. In order to insure uniformity of practices within a hospital, it is suggested that all routines be in written form, and available for reference in the maternity department.

107. The mother, or other responsible person who is to care for the child, shall be informed of any abnormalities or malformations existing at the time of discharge.

108. Instructions on feeding and other instructions should be given to the mother in accordance with the physician's recommendations. If further instruction is needed, it is suggested that the mother be referred to the local public health department, with the consent of the attending physician. The local health department or the Georgia Department of Public Health, Atlanta 3, Georgia, will furnish literature upon request for distribution to mothers.

109. No operator of a hospital offering maternity service or

any person connected with a maternity hospital may place children in family homes under any circumstances. In case a mother who gives birth to a child in a hospital desires assistance in placing the child, it shall be the responsibility of the hospital to refer her to the County Department of Public Welfare, or to such other agency as is legally qualified to assist in such placement.

110. No member of the hospital staff, or employee of the hospital, shall give information regarding an unmarried mother or her child except to persons legally authorized to receive such information.

111. Plans shall be made so that the infant, if normal and well, will not be left in the hospital after discharge of the mother, except in instances in which the mother's illness or death, or communicable disease in the household, makes it inadvisable for the infant to be cared for at home. This does not apply to the hospital care of premature infants.

112. Infants born out of wedlock shall not be kept for care following the discharge of the mother except upon the joint approval of the physician and the welfare agency responsible for plans for the unmarried mother and child.

Pediatrics

113. Hospitals providing pediatric care shall maintain such facilities apart from the service for adult patients as well as apart from the newborn nursing service. Proper facilities for the isolation of children with communicable infectious, or contagious diseases shall be provided.

114. It is desirable to have glassed partitions between pediatric beds to prevent the spread of airborne contamination. Only adult visitors should be allowed in the pediatric department.

ADJUNCT SERVICES

Clinical Laboratory

115. Laboratory service shall be available in each hospital of fifteen or more beds. Smaller hospitals shall make arrangements with a competent clinical laboratory to have the work done. In addition, facilities for emergency laboratory work, such as urinalysis, hematology, blood-typing and cross-matching, shall be provided.

116. The laboratory should be under the direct supervision of a staff physician.

X-Ray

117. X-ray facilities shall be available in hospitals having fifteen or more beds. Smaller hospitals shall make arrangements to obtain such service from qualified sources.

118. The radiology department should include diagnostic equipment, a fluoroscopic unit and film development facilities. The x-ray department should be under the direct supervision of a staff physician.

Pharmacy

119. If a dispensing and manufacturing pharmacy is maintained, the State Law requires that only a registered pharmacist, licensed to practice in the State of Georgia, may fill prescriptions and compound preparations for hospital work.

120. There shall be adequate space and proper facilities for the compounding, dispensing and storage of pharmaceuticals. Refrigeration facilities for drug storage shall be available.

121. A permit from the Federal Bureau of Narcotics is necessary for the purchase of narcotics for stock use. These narcotics shall be stored in a securely locked cabinet, accessible only to the pharmacist or other responsible person in charge. Any institution using narcotics in considerable amounts will find it more convenient to have a permit to procure narcotics than to furnish them to patients on special prescription.

Service Equipment

122. The equipment and supplies necessary for proper protection, comfort, diagnosis and treatment of the patient shall be provided within the limits of the services offered.

Practices and Procedures

123. All practices and procedures necessary for the proper protection, comfort, diagnosis and treatment of the patient, within the limits of the services offered, and in accordance with the modern concept of good hospital care, shall be carried out.

PERSONNEL

Governing Body

124. Unless owned and operated by an individual, partnership, or corporation, each hospital shall have a governing body responsible for its maintenance and operation.

Administration

125. If a governing body or board is responsible for the operation of a hospital, such board shall employ a competent administrator, preferably with some training and experience.

Medical Staff

126. In each hospital, the professional service to patients shall be performed by a medical staff appointed by the governing body of the institution.

127. If the medical staff is composed of five or more members, such staff shall be organized.

Nursing Staff

128. The person in charge of the nursing service of the hospital shall be a graduate, registered nurse when available. There shall be employed in the hospital sufficient nursing personnel to give adequate care to patients.

Technical Personnel

129. There shall be sufficient qualified personnel to operate properly the various departments or adjunct services requiring technical skill, such as the laboratory, x-ray department, physiotherapy, pharmacy, and other adjunct service departments.

Service Personnel

130. There shall be sufficient service personnel to insure the comfort and protection of the patient.

Health of Personnel

131. All hospital employees shall be free from communicable disease. Examination upon employment and yearly examinations thereafter are recommended for the control of communicable disease among personnel.

RECORDS

Clinical Records

132. Adequate, complete clinical records, sufficient to validate diagnosis and to establish the basis upon which treatment was given, shall be kept on each patient.

133. The clinical record of each patient shall include the following:

- a. Identification data: Name, Address, Age, Sex, Marital Status
- b. Date of Admission
- c. Complaint
- d. Result of Examination
- e. Diagnosis
- f. Medical Treatment
- g. Surgical Record, if any
- h. Condition on Discharge
- i. Date of Discharge
- j. Attending Physician

It is desirable that the clinical record also contain the following:

- k. Personal and family medical history
- l. History of present illness
- m. Special examinations (consultations, clinical laboratory, x-ray, etc.)
- n. Provisional diagnosis
- o. Progress and nurse notes
- p. Temperature chart, including pulse and respirations
- q. Medications
- r. Final diagnosis
- s. In case of death, autopsy findings, if any

134. All orders of physicians shall be written in ink or indelible pencil and signed by the physician in charge. Such orders shall be preserved on the patient's chart or in the established record of such orders. These orders and clinical records shall be preserved in accordance with standards which have been established by recognized standardizing agencies so that past records may be available to any doctor desiring information contained therein.

Operational Records

135. Records of patient statistics shall be kept by the hospital and be submitted to the Georgia Department of Public Health upon request.

136. The operational records should be kept in such a way as to easily yield the following information:

- a. Daily patient record and count.
- b. Number of admissions or discharges per month and year.
- c. Number of patient days per month and year.

GENERAL REGULATIONS

137. Every hospital shall comply with all laws, ordinances, rules and regulations which provide for the registration of births and deaths, and the reporting of communicable and other diseases.

138. Every hospital shall protect its patients and the general public against the committing of any illegal act or acts within the institution, and the conduct therein of any practices detrimental to the welfare and interests of its patients or the general public.

Adopted by the State Board of Health on October 21, 1948.

Rules and Regulations for Nursing Homes*Definitions:*

The term "Nursing Home" means any institution which maintains and operates facilities for providing care, for a period in excess of twenty-four hours, for two or more convalescent or chronically ill patients.

Where qualifying adjectives such as: adequate, proper, safe, sufficient, satisfactory, suitable, etc., are used in these Rules and Regulations they shall mean the standard of completeness, performance, propriety, or safety, that is being maintained by the better nursing homes or related institutions as are then operating under permits granted by the State Board of Health.

BUILDINGS AND EQUIPMENT PRACTICES AND PROCEDURES WITHIN THE NURSING HOME

Construction of New Nursing Homes and Additions to Existing Nursing Homes

1. Any individual or group which proposes to build a new nursing home or any nursing home which proposes to construct an addition to, or materially alter the present construction of its building or buildings, shall comply with local building codes in all such construction. Compliance with such codes is necessary in order to obtain a Permit to Operate a Nursing Home from the Georgia Department of Public Health.

Sound Construction and Good Repair

2. The nursing home buildings shall be of sound construction and shall be kept in good repair at all times.

3. Buildings used to house patients shall be of such construction that no hazards to the life and safety of patients and personnel exist. Buildings shall be capable of withstanding the weight and elements to which they are or may be subjected. The buildings shall be maintained so that there are no leaky roofs or walls, loose plaster, uneven flooring, broken windows, faulty equipment, and other undesirable conditions which may be placed in the category of poor maintenance. Heating equipment, electrical equipment and elevators shall be so constructed and maintained as to assure the safety of patients and personnel.

Fire Prevention

4. Buildings shall be approved by the local fire marshal or be in compliance with local and State fire regulations. If no fire regulations exist or are enforced by the local government or in case existing regulations do not include all the regulations hereinafter set forth, it shall be the responsibility of the owner or governing body of the nursing home to see to it that no fire hazards, endangering the lives and safety of patients and personnel, exist in the nursing home and that the following fire prevention regulations are observed.

5. All parts of the heating system shall be so constructed

and maintained as to eliminate fire hazards. If the furnace or boiler room is located in the nursing home building, it shall be cut off from the rest of the building by use of fire-resistive material. Metal and asbestos protection shall be provided if steam pipes and hot water pipes are placed closer than two inches from woodwork.

6. Chimneys and stove pipes, if any, shall be thoroughly cleaned once a year. If stove pipes pass through closets or concealed places, pipes shall be properly insulated with approved fire-resistive material. All joints shall be riveted and properly supported.

7. No gas or oil heaters shall be used in rooms unless such heaters are directly connected with a flue which opens to the outside air. All gas connections shall be made of metal. Rubber tubing shall not be used as a connection for gas heaters.

8. Laundry chutes and shafts shall be lined with fire-resistive material and have close-fitting doors, also lined with fire-resistive material. Such shafts shall not terminate in an attic. All elevator shafts shall be fire-resistant.

9. All electrical work shall comply with local ordinances and codes and/or with the National Electrical Code and Standards of the National Board of Fire Underwriters.

10. Storerooms, basements, attic lockers, and closets shall be kept free from accumulated combustible refuse. Non-usable mattresses shall be destroyed, and stored mattresses shall be arranged in small piles with sufficient space for access to all sides of the mattress pile, or placed in a fire-resistant room.

11. Paints, varnishes, oils and other highly combustible materials shall be stored in buildings used for housing patients only if placed in properly vented, fire-resistant rooms. Proper precautions shall be taken in the handling of all highly combustible materials. Oily cloths shall be kept in closed, metal containers.

12. Adequate facilities for the notification of local fire-fighting forces shall be readily accessible.

13. An acceptable fire extinguisher shall be available for use on each floor. Essential personnel shall be given periodic instruction in the use of such equipment. Fire extinguishers shall be checked at six month intervals to see that they are in good working order at all times. A record of this inspection shall be recorded on a tag and attached to the extinguisher.

14. There shall be more than one means of egress leading to outside of the building from each floor. Exits shall be located as near to the opposite ends of the building as practicable. Exits shall be indicated by the proper lights and signs. Such exits shall not be kept locked from the inside.

Safety and Comfort of Patients and Personnel

15. Proper facilities insuring the safety and comfort of patients and personnel, shall be provided.

16. The heating plant shall be adequate to maintain a temperature of 70 degrees Fahrenheit in severe weather in all rooms used for patients.

17. Each patient's room shall be an outside room with a satisfactory amount of natural light. It is recommended that the window area be at least one-eighth of the floor area.

18. Every room, including the storerooms and the attic, shall have sufficient artificial lighting facilities so that all parts of the rooms shall be clearly visible under such artificial lighting. Hallways, stairways, inclines and ramps shall be adequately lighted to prevent accidents. All service rooms and work centers, such as medicine cabinets and nurses' charting desks shall be adequately lighted.

19. Emergency lighting facilities shall be provided and distributed so as to be readily available to the personnel on duty in the event of a power failure. This emergency equipment shall be periodically inspected to see that it is maintained in good working order. Flashlights and battery operated lamps are suggested. Open flame type lamps shall not be used.

20. The nursing home buildings shall be adequately ventilated at all times. Kitchens, bathrooms and service rooms should be so located and ventilated by windows or mechanical means as to prevent offensive odors from entering patients' rooms and public corridors.

21. All stairways shall be provided with handrails and shall have a clearance of 48 inches. All open stairways shall be provided with guardrails.

22. Rooms extending below ground level shall not be used for patients unless such rooms are dry, well ventilated and otherwise suitable for occupancy.

23. Rooms shall be of sufficient size to allow not less than

80 square feet of floor space per patient in wards with at least three and one-half feet between beds and 100 square feet of floor space in private rooms. Doors to patients' rooms shall be at least three feet ten inches wide in order to permit easy removal of occupied beds.

24. Corridors shall be at least eight feet wide.

25. A comfortable bed, with sufficient clean bedding and bed linen shall be provided for each patient.

26. Sufficient storage space shall be provided for the personal belongings of each patient.

27. Signals shall be provided at each bed so that the patient can summon the attendant on duty.

28. In case two or more patients occupy the same room, privacy shall be secured by means of screens or curtains.

29. Toilet facilities in reasonable ratio to the number and sex of the patients cared for, and located conveniently to the patients' rooms, shall be provided.

30. Insofar as possible, quiet shall be maintained in the patient area.

31. Facilities for the preparation and serving of palatable and appetizing meals to the patient shall be provided.

32. Every effort in behalf of the safety and comfort of the patient shall be made.

Transportation and Communication

33. There shall be proper means of transportation and communication to and from the nursing home.

34. The nursing home shall be served by a good road, kept passable at all times. Public transportation facilities should be available. Adequate parking space for private automobiles should be provided.

35. Telephone connection with the local exchange shall be provided.

Cleanliness and Sanitation

36. Proper facilities for sanitation shall be provided throughout the nursing home buildings and premises for the purpose of insuring cleanliness and protection against infectious diseases.

37. The walls and floors of the nursing home shall be of a character to permit frequent washing, cleaning or painting.

38. The construction, maintenance and housekeeping of the nursing home shall be such as to prevent the entrance and harborage of rats, other rodents, and insects.

39. The water supply shall be of safe, sanitary quality, suitable for human use, and the supply system shall be approved by the Georgia Department of Public Health. The water shall be distributed to conveniently located taps throughout the buildings. Hot water shall be available at all times.

40. Sewage shall be discharged into a municipal sewerage system, where such a system is available; otherwise, the sewage shall be collected, treated, and disposed of in an independent sewerage system which is approved by the Georgia Department of Public Health.

41. The plumbing and drainage, or other arrangements for the disposal of excreta and infectious discharges and institutional wastes shall be in accordance with local codes and the standards approved by the Georgia Department of Public Health.

42. All garbage shall be disposed of in a manner which will not permit the transmission of disease, create a nuisance or provide a breeding place for flies. All containers for garbage shall be water-tight, have tight-fitting covers, be rodent proof and be kept in a sanitary manner.

43. All outside doors, windows and other openings shall be screened with wire screen or its equivalent with not less than sixteen meshes per lineal inch. All screen doors shall open outward and be equipped with self-closing devices.

44. Incineration facilities or other approved methods for the disposal of infected dressings and similar material shall be provided.

45. All handling of food shall conform with the ordinances and codes regulating eating and drinking establishments recognized by both the U. S. Public Health Service and the Georgia Department of Public Health.

46. Storerooms for food storage shall be clean and well ventilated. All food shall be stored so as to be protected from dust, flies, rodents, vermin, unnecessary handling, droplet infection, overhead leakage and other sources of contamination.

47. In places where food is stored, prepared or consumed, all poisonous chemicals and other sterilizing or rodent or insect poisoning materials shall be properly labeled, stored properly, and so handled as to avoid danger of poisoning humans.

48. Each nursing home shall have laundry facilities or make provision for the proper cleansing of linen and other washable goods. In case linen is sent to a commercial laundry, the person in charge of the nursing home should inspect such laundry from time to time.

49. All multi-use utensils used for eating, drinking, or in the preparation or serving of food shall be effectively cleaned and disinfected after each usage. Gross food particles should be removed by careful scraping and prerinsing in running hot water. Brushes, baskets or sprays are suggested. The dishes should be thoroughly washed in hot water 110 to 120 degrees Fahrenheit using an adequate amount of effective soap or detergent. Following this, the utensils should be rinsed in hot water to remove soap, and disinfected by one of the following methods:

- a. Immersion for at least 2 minutes in clean water at 170 degrees Fahrenheit.
- b. Immersion for at least one-half minute in boiling water.
- c. Immersion for at least 2 minutes in a luke warm chlorine solution containing at least 50 parts per million of available chlorine. Chlorine is *not* recommended for silverware. Cleansing of silver should be done using either (1) or (2) above.

Steam or hot water cabinets can be made effective. Results obtained with dishwashing machines should be equal to those obtained by the methods outlined above. After disinfection, the utensils should be allowed to drain and dry in racks or baskets on non-absorbent surfaces. Drying cloths should not be used. Dishes should be stored in closed cupboards for protection against dust and moisture.

50. Glass-filling devices shall be constructed so as to prevent any contact of the upper-one-third of the glass with the device, and in addition, so that no portion of the device extends into the glass.

51. All ice used in contact with food or drink shall be from a satisfactory source and handled and dispensed in a sanitary manner.

52. The milk supply shall meet local, state, and Georgia Department of Public Health requirements.

53. Hand-washing facilities, of the proper type, shall be provided throughout the nursing home, including examining and treatment rooms, main and diet kitchens, utility and other service rooms, toilet rooms, and rooms used for the isolation of patients. Soap, running water, and an adequate supply of towels shall be provided. Use of a common towel is prohibited. Lavatories in patients' rooms and wards are desirable.

54. There shall be provision for the proper sterilization of dressings, utensils, instruments and water. The nursing home should adopt a recognized method of checking sterilizer performance, such as thermocouple indicators connected to a constant recording instrument, use of a fusing control in the largest package of each load, or the bacteriological examination, at frequent intervals, of sterilized dressings. A cabinet or other suitable enclosure should be provided for keeping sterile equipment in a clean, convenient and orderly manner. Special precaution should be taken so that unsterile and sterile supplies are not mixed.

55. Adequate refrigeration facilities shall be provided in the nursing home. Perishable food should be kept at a temperature below 50 degrees Fahrenheit in order to prevent deterioration. It is suggested that there be a reliable thermometer in each refrigerator. Biologicals and other drugs requiring refrigeration should be kept at the proper temperature as recommended by the pharmacopeia or the manufacturer. Food and drugs should not be kept in the same refrigerator unless the drugs are properly protected against mold formation.

56. The accommodations for patients, as well as the medical and service facilities, shall be kept clean and sanitary, and in good order. Proper housekeeping standards shall be maintained at all times.

Nursing Service

57. There shall be adequate facilities for the nursing service offered by the home.

58. Sufficient equipment for nursing care, according to the type of patients accepted by the institution, shall be available.

59. A sufficient number of wash basins, mouthwash cups, urinals and bedpans for the use of each individual patient shall

be provided, or such utensils shall be disinfected after each using. Bedpan covers shall not be used interchangeably.

60. A sufficient number of clinical thermometers shall be available to permit adequate disinfection before using.

61. Hot water bags shall be covered and the temperature of the water carefully checked before placing in beds. Greatest care should be exercised to see that hot water bags do not leak. Electric heating pads shall be periodically checked by a qualified electrician.

62. Restraints shall be applied only when they are necessary to prevent injury to the patient or to others, and shall be used only when alternate methods are not sufficient to accomplish these purposes. In applying restraints, careful consideration shall be given to the methods by which they can be speedily removed in case of fire or other emergency. Doors to patients' rooms shall be locked only when absolutely necessary and the type of lock used shall be such that can be easily opened from the outside in case of emergency.

63. Utility rooms shall be outside rooms with adequate lighting and ventilation. They should be conveniently located for the efficient conduct of work. There shall be adequate space and facilities for the proper cleansing and storage of nursing supplies and equipment.

64. Suitable provision shall be made for the preparation of medications and treatments.

65. All medications, poisons and stimulants shall be plainly labeled and stored in a cabinet or storeroom accessible only to nursing personnel. Cabinets in which narcotics are stored shall, according to the Federal Narcotic Regulations, be securely locked and accessible only to the person in charge of the nursing unit. Remaining portions of compounded medications shall be destroyed after the patient for whom the drug preparation was ordered has been discharged.

66. The nursing home shall make provision for the isolation of contagious or communicable disease patients. Many nursing homes do not have specialized contagious disease departments, but do find it necessary from time to time to care for patients with contagious disease. Isolation rooms shall have adjacent lavatory and toilet, and be located either at the end of a corridor or off a sub-corridor. There should be adequate facilities for cleansing bedpans and other equipment. A separate utility

room, equipped with sink and utensil sterilizer, should be provided.

67. The nursing staff shall compare favorably with that of the better nursing homes throughout the State of Georgia, and conform with generally accepted national standards. The needs of the individual nursing home will determine the number of nurses to be employed.

Service Equipment

68. The equipment and supplies necessary for proper protection, comfort, diagnosis and treatment of the patient shall be provided within the limits of the services offered.

Practices and Procedures

69. All practices and procedures necessary for the proper protection, comfort, diagnosis and treatment of patients, within the limits of the services offered, and in accordance with the modern concept of good nursing care, shall be carried out.

PERSONNEL

Governing Body

70. Unless owned and operated by an individual, partnership or corporation, each nursing home shall have a governing body responsible for its maintenance and operation.

Medical Service

71. In each nursing home the professional service to patients shall be performed by a medical staff appointed by the governing body of the institution.

Nursing Staff

72. There shall be one person who is definitely in charge of the nursing service of the nursing home. She may be either a registered or a practical nurse having sufficient experience to qualify her for responsibility for the care of the patients in the institution.

Service Personnel

73. There shall be sufficient service personnel to insure the comfort and protection of the patient.

Health of Personnel

74. All nursing home employees shall be free from communicable disease. Examination upon employment and yearly examinations thereafter are recommended for the control of communicable disease among personnel.

RECORDS

Clinical Records

75. Adequate, complete clinical records, sufficient to validate diagnosis and to establish the basis upon which treatment was given, shall be kept on each patient.

76. The clinical record of each patient shall include the following:

- a. Identification data: Name, Address, Age, Sex, Marital Status
- b. Date of Admission
- c. Complaint
- d. Result of Examination
- e. Diagnosis
- f. Medical Treatment
- g. Condition on discharge
- h. Date of Discharge
- i. Attending physician

All orders of physicians shall be written in ink or indelible pencil and signed by the physician in charge. Such orders shall be preserved on the patient's chart or in the established record of such orders. These orders and clinical records shall be kept a sufficient length of time, so that past records may be available to any doctor desiring information contained therein.

Operational Records

77. Records of patient statistics shall be kept by the nursing home and be submitted to the Georgia Department of Public Health upon request.

78. The operational records should be kept in such a way as to easily yield the following information:

- a. Daily patient record and count
- b. Number of admissions or discharges per month and year
- c. Number of patient days per month and year

GENERAL REGULATIONS

79. Every nursing home shall comply with all laws and ordinances, rules and regulations which provide for the registration of deaths and the reporting of communicable and other diseases.

80. Every nursing home shall protect its patients and the general public against the committing of any illegal act or acts within the institution, and the conduct therein of any practices detrimental to the welfare and general interest of its patients or the general public.

Adopted by the State Board of Health on October 21, 1948.

Rules and Regulations for Infirmeries

Definitions:

The term "Infirmary", as used in these Rules and Regulations, means any Educational or Child Caring Institution which maintains and operates facilities for providing care, for a period in excess of twenty-four hours, for two or more ill patients.

Where qualifying adjectives such as: adequate, proper, safe, sufficient, satisfactory, suitable, etc., are used in these Rules and Regulations, they shall mean the standard of completeness, performance, propriety, or safety that is being maintained by the better infirmaries or related institutions as are then operating under permits granted by the State Board of Health.

BUILDINGS AND EQUIPMENT PRACTICES AND PROCEDURES WITHIN THE INFIRMARY

Construction of New Infirmeries and Additions to Existing Infirmeries

1. Any individual or group which proposes to build a new infirmary or which proposes to construct an addition to, or

materially alter the present construction of its building or buildings, shall comply with local and state building codes in all such construction. Compliance with such codes is necessary in order to obtain a Permit to Operate an Infirmary from the Georgia Department of Public Health.

Sound Construction and Good Repair

2. The Infirmary buildings shall be of sound construction and shall be kept in good repair at all times.

3. Buildings used to house patients shall be of such construction that no hazards to the life and safety of patients and personnel exist. Buildings shall be capable of withstanding the weight and elements to which they are or may be subjected. The buildings shall be maintained so that there are no leaky roofs or walls, loose plaster, uneven flooring, broken windows, faulty equipment, and other undesirable conditions which may be placed in the category of poor maintenance. Heating equipment, electrical equipment and elevators shall be so constructed and maintained as to assure the safety of patients and personnel.

Fire Prevention

4. Buildings shall be approved by the local fire marshal or be in compliance with local and State fire regulations. If no fire regulations exist or are enforced by the local government or in case existing regulations do not include all the regulations hereinafter set forth, it shall be the responsibility of the owner or governing body of the infirmary to see to it that no fire hazards, endangering the lives and safety of patients and personnel, exist in the infirmary and that the following fire prevention regulations are observed.

5. All parts of the heating system shall be so constructed and maintained as to eliminate fire hazards. If the furnace or boiler room is located in the infirmary building, it shall be cut off from the rest of the building by use of fire-resistive material. Metal and asbestos protection shall be provided if steam pipes and hot water pipes are placed closer than two inches from **woodwork**.

6. Chimneys and stove pipes, if any, shall be thoroughly cleaned once a year. If stove pipes pass through closets or concealed places, pipes shall be properly insulated with ap-

proved fire-resistive material. All joints shall be riveted and properly supported.

7. No gas or oil heaters shall be used in rooms unless such heaters are directly connected with a flue which opens to the outside air. All gas connections shall be made of metal. Rubber tubing shall not be used as a connection for gas heaters.

8. Laundry chutes and shafts shall be lined with fire-resistive material and have close-fitting doors, also lined with fire-resistive material. Such shafts shall not terminate in an attic. All elevator shafts shall be fire-resistant.

9. All electrical work shall comply with local ordinances and codes and/or with the National Electrical Code and Standards of the National Board of Fire Underwriters.

10. Storerooms, basements, attic lockers, and closets shall be kept free from accumulated combustible refuse. Non-usable mattresses shall be destroyed, and stored mattresses shall be arranged in small piles with sufficient space for access to all sides of the mattress pile or placed in a fire-resistant room.

11. Paints, varnishes, oils and other highly combustible materials shall be stored in buildings used for housing patients only if placed in properly vented fire-resistant rooms. Proper precautions shall be taken in the handling of all highly combustible materials. Oily cloths shall be stored in closed, metal containers.

12. Adequate facilities for the notification of local fire-fighting forces shall be readily accessible.

13. An acceptable fire extinguisher shall be available for use on each floor. Essential personnel shall be given periodic instruction in the use of such equipment. Fire extinguishers shall be checked at six month intervals to see that they are in good working order at all times.

14. There shall be more than one means of egress leading to the outside of the building from each floor. Exits shall be located as near to the opposite ends of the buildings as practicable. Exits shall be indicated by the proper lights and signs. Such exits shall not be kept locked from the inside.

Safety and Comfort of Patients and Personnel

15. Proper facilities, insuring the safety and comfort of patients and personnel, shall be provided.

16. The heating plant shall be adequate to maintain a temperature of 70 degrees Fahrenheit in severe weather in all rooms used for patients.

17. Each patient's room shall be an outside room with a satisfactory amount of natural light. It is recommended that the window area be at least one-eighth of the floor area.

18. Every room including the storerooms and the attic, shall have sufficient artificial lighting facilities so that all parts of the room shall be clearly visible under such artificial lighting. Hallways, stairways, inclines and ramps shall be adequately lighted to prevent accidents. All service rooms and work centers, such as medicine cabinets and nurses' charting desks shall be adequately lighted.

19. Emergency lighting facilities shall be provided and distributed so as to be readily available to the personnel on duty in the event of a power failure. This emergency equipment shall be periodically inspected to see that it is maintained in good working order. Flashlights and battery operated lamps are suggested. Open flame type lamps shall not be used.

20. The infirmary buildings shall be adequately ventilated at all times. Kitchens, bathrooms and service rooms should be so located and ventilated by windows or mechanical means as to prevent offensive odors from entering patients' rooms and public corridors.

21. All stairways shall be provided with handrails and shall have a clearance of 48 inches. All open stairways shall be protected with guardrails.

22. Rooms extending below ground level shall not be used for patients unless such rooms are dry, well ventilated and otherwise suitable for occupancy.

23. Rooms shall be of sufficient size to allow not less than 80 square feet of floor space per patient in wards with at least three and one-half feet between beds and 100 square feet of floor space in private rooms. Doors to patients' rooms shall be at least three feet ten inches wide in order to permit easy removal of an occupied bed.

24. Corridors shall be at least eight feet wide.

25. A comfortable bed, with sufficient clean bedding and bed linen shall be provided for each patient.

26. Sufficient storage space shall be provided for the personal belongings of each patient.

27. In case two or more patients occupy the same room, privacy shall be secured by means of screens or curtains.

28. Signals shall be provided at each bed so that patients can summon the attendant on duty.

29. Toilet facilities, in reasonable ratio to the number and sex of the patients cared for, and located conveniently to patients' rooms, shall be provided.

30. Insofar as possible, quiet shall be maintained in the patient area.

31. Facilities for the preparation and serving of palatable and appetizing meals for patients shall be provided.

32. Every effort in behalf of the safety and comfort of patients shall be made.

Transportation and Communication

33. There shall be proper means of transportation and communication to and from the infirmary.

34. The infirmary shall be served by a good road, kept passable at all times. Public transportation facilities should be available. Adequate parking space for private automobiles should be provided.

35. Telephone connection with the local exchange shall be provided. Adequate facilities for intramural communication shall be available.

Cleanliness and Sanitation

36. Proper facilities for sanitation shall be provided throughout the infirmary building and premises for the purpose of insuring cleanliness and protection against infectious diseases.

37. The walls and floors of the infirmary shall be of a character to permit frequent washing, cleaning or painting. Trim, moulding and baseboards of wood should be avoided because of the difficulty of cleaning.

38. The construction, maintenance, and housekeeping of the infirmary shall be such as to prevent the entrance and harborage of rats, other rodents, and insects.

39. The water supply shall be of safe, sanitary quality, suitable for human use, and the supply system shall be approved by the Georgia Department of Public Health. The water shall

be distributed to conveniently located taps throughout the buildings. Hot water shall be available at all times.

40. Sewage shall be discharged into a municipal sewerage system, where such a system is available; otherwise, the sewage shall be collected, treated and disposed of in an independent sewerage system which is approved by the Georgia Department of Public Health.

41. The plumbing and drainage, or other arrangements for the disposal of excreta and infectious discharges and institutional wastes shall be in accordance with local codes and the standards approved by the Georgia Department of Public Health.

42. All garbage shall be disposed of in a manner which will not permit the transmission of disease, create a nuisance or provide a breeding place for flies. All containers for garbage shall be water-tight, have tight-fitting covers, be rodent-proof and be kept in a sanitary manner.

43. All outside doors, windows, and other openings shall be screened with wire screen, or its equivalent, with not less than sixteen meshes per lineal inch. All screen doors shall open outward and be equipped with self-closing devices.

44. Incineration facilities or other approved methods for the disposal of infected dressings, surgical and obstetric wastes, and other similar material shall be provided.

45. All handling of food shall conform with the ordinances and codes regulating eating and drinking establishments recognized by both the U. S. Public Health Service and the Georgia Department of Public Health.

46. Storerooms for food storage shall be clean and well ventilated. All food shall be stored so as to be protected from dust, flies, rodents, vermin, unnecessary handling, droplet infection, overhead leakage and other sources of contamination.

47. In places where food is stored, prepared or consumed, all poisonous chemicals and other sterilizing or rodent or insect poisoning materials shall be properly labeled, stored properly, and so handled as to avoid danger of poisoning humans.

48. Each infirmary shall have laundry facilities or make provision for the proper cleansing of linen and other washable goods. In case linen is sent to a commercial laundry, it is recommended that the nurse in charge or a responsible person

connected with the operation of the infirmary inspect such laundry from time to time.

49. All multi-use utensils used for eating, drinking and in the preparation or serving of food shall be effectively cleaned and disinfected after each usage. Gross food particles should be removed by careful scraping and prerinsing in running hot water. Brushes, baskets or sprays are suggested. The dishes should be thoroughly washed in hot water 110 to 120 degrees Fahrenheit using an adequate amount of effective soap or other detergent. Following this, the utensils should be rinsed in hot water to remove soap, and disinfected by one of the following methods:

- a. Immersion for at least 2 minutes in clean water at 170 degrees Fahrenheit.
- b. Immersion for at least one-half minute in boiling water.
- c. Immersion for at least 2 minutes in a luke warm chlorine solution containing at least 50 parts per million of available chlorine. Chlorine is *not* recommended for silverware. Cleansing of silver should be done using either (1) or (2) above.

Steam or hot water cabinets can be made effective. Results obtained with dish-washing machines should be equal to those obtained by the methods outlined above. After disinfection, the utensils should be allowed to drain and dry in racks or baskets on non-absorbent surfaces. Drying cloths should not be used. Dishes should be stored in closed cupboards for protection against dust and moisture.

50. Glass-filling devices shall be constructed so as to prevent any contact of the upper one-third of the glass with the device, and in addition, so that no portion of the device extends into the glass.

51. All ice used in contact with food or drink shall be from a satisfactory source and handled and dispensed in a sanitary manner.

52. The milk supply shall meet local, State and Georgia Department of Public Health requirements.

53. There shall be hand-washing facilities, of the proper type, throughout the infirmary, including examining and treatment rooms, main and diet kitchens, utility and other service rooms, toilet rooms, and rooms used for the isolation of patients. Soap, running water, and an adequate supply of towels

shall be provided. The use of a common towel is prohibited. Lavatories in patients' rooms and wards are desirable.

54. There shall be provision for the proper sterilization of dressings, utensils, instruments and water. The infirmary should adopt a recognized method of checking sterilizer performance, such as thermocouple indicators connected to a constant recording instrument, use of a fusing control in the largest package of each load, or the bacteriological examination, at frequent intervals, of sterilized dressings. A cabinet or other suitable enclosure should be provided for keeping sterile equipment in a clean, convenient and orderly manner. Special precaution should be taken so that unsterile and sterile supplies are not mixed.

55. Adequate refrigeration facilities shall be provided throughout the infirmary. Perishable food should be kept at a temperature below 50 degrees Fahrenheit in order to prevent deterioration. It is suggested that there be a reliable thermometer in each refrigerator. Biologicals and other drugs requiring refrigeration should be kept at the proper temperature as recommended by the pharmacopeia or the manufacturer. Food and drugs should not be kept in the same refrigerator unless the drugs are properly protected against mold formation.

56. The accommodations for patients, as well as the medical and service facilities, shall be kept clean and sanitary, and in good order. Proper housekeeping standards shall be maintained at all times.

Facilities for Services Offered

57. There shall be adequate facilities for each service offered by the infirmary.

General Nursing

58. Sufficient equipment for nursing care, according to the type of patients accepted by the infirmary, shall be available.

59. A sufficient number of wash basins, mouthwash cups, urinals and bedpans for the use of each individual patient shall be provided, or such utensils shall be disinfected after each using. Bedpan covers shall not be used interchangeably.

60. A sufficient number of clinical thermometers shall be available to permit adequate disinfection before using.

61. Hot water bags shall be covered and the temperature of the water carefully checked before placing in beds. Greatest care should be exercised to see that hot water bags do not leak. Electric heating pads shall be periodically checked by a qualified electrician.

62. Restraints shall be applied only when they are necessary to prevent injury to the patient or to others, and shall be used only when alternate methods are not sufficient to accomplish these purposes. In applying restraints, careful consideration shall be given to the methods by which they can be speedily removed in case of fire or other emergency. Doors to patients' rooms shall be locked only when absolutely necessary and the type of lock used shall be such that can be easily opened from the outside in case of emergency.

63. Utility rooms shall be outside rooms with adequate lighting and ventilation. They should be conveniently located for the efficient conduct of work. There shall be adequate space and facilities for the proper cleansing and storage of nursing supplies and equipment.

64. Suitable provision shall be made for the preparation of medications and treatments.

65. All medicines, poisons, and stimulants shall be plainly labeled and stored in a cabinet or storeroom accessible only to nursing personnel. Cabinets in which narcotics are stored shall, according to the Federal Narcotic Regulations, be securely locked and accessible only to the person in charge of the nursing unit. Remaining portions of compounded medications shall be destroyed after the patient for whom the drug preparation was ordered has been discharged.

66. The infirmary shall make provision for the isolation of contagious or communicable disease patients. Many infirmaries do not have specialized contagious disease departments, but do find it necessary from time to time to care for patients with contagious disease. Isolation rooms shall have adjacent lavatory and toilet, and be located either at the end of a corridor or off a sub-corridor. There should be adequate facilities for cleansing bedpans and other equipment. A separate utility room, equipped with sink and utensil sterilizer should be provided.

67. The nursing staff shall compare favorably with that of the better infirmaries throughout the State of Georgia, and conform with generally accepted national standards. The needs

of the infirmary will determine the number of nurses to be employed.

ADJUNCT SERVICES

Clinical Laboratory

68. Laboratory service shall be available in each infirmary or arrangements made with a competent clinical laboratory to have necessary work done.

X-Ray

69. X-Ray facilities shall be available in infirmaries or arrangements made to obtain such service from qualified sources when required.

Service Equipment

70. The equipment and supplies necessary for proper protection, comfort, diagnosis and treatment of the patient shall be provided.

Practices and Procedures

71. All practices and procedures necessary for the proper protection, comfort, diagnosis and treatment of the patient, within the limits of the services offered and in accordance with the modern concept of good infirmary care, shall be carried out.

PERSONNEL

Medical Service

72. In each infirmary of schools and children's homes the professional service to patients shall be performed by a medical staff appointed by the governing body of the institution.

Nursing Staff

73. There shall be one person who is definitely in charge of the nursing service of the infirmary. She may be either a registered or a practical nurse having sufficient experience to qualify her for responsibility for the care of the patients in the institution.

Service Personnel

74. There shall be sufficient service personnel to insure the comfort and protection of the patients.

Health of Personnel

75. All infirmity employees shall be free from communicable disease. Examination upon employment and yearly examinations thereafter are recommended for the control of communicable disease among personnel.

RECORDS

Clinical Records

76. Adequate, complete clinical records, sufficient to validate diagnosis and to establish the basis upon which treatment was given, shall be kept on each patient.

77. The clinical record of each patient shall include the following:

- a. Identification data: Name, Address, Age, Sex, Marital Status
- b. Date of Admission
- c. Complaint
- d. Result of Examination
- e. Diagnosis
- f. Medical Treatment
- g. Surgical Record, if any
- h. Condition on Discharge
- i. Date of Discharge
- j. Attending Physician

It is desirable that the clinical record also contain the following:

- k. Personal and family medical history
- l. History of present illness
- m. Special examinations (consultations, clinical laboratory, x-ray, etc.)
- n. Provisional diagnosis
- o. Progress and nurse notes
- p. Temperature chart, including pulse and respirations

- q. Medications
- r. Final diagnosis
- s. In case of death, autopsy findings, if any

78. All orders of physicians shall be written in ink or indelible pencil and signed by the physician in charge. Such orders shall be preserved on the patient's chart or in the established record of such orders. These orders and clinical records shall be kept a sufficient length of time that past records may be available to any doctor desiring information contained therein.

GENERAL REGULATIONS

79. Every infirmary shall comply with all laws, ordinances, rules and regulations which provide for the reporting of communicable and other diseases.

80. Every infirmary shall protect its patients and the general public against the committing of any illegal act or acts within the institution, and the conduct therein of any practices detrimental to the welfare and interests of its patients or the general public.

Adopted by the State Board of Health on October 21, 1948.

Rules and Regulations for Maternity Homes

Definitions:

The term "maternity home", as used in these Rules and Regulations, means any institution which maintains and operates facilities for providing obstetrical care over a period of more than twenty-four hours.

Where qualifying adjectives such as: adequate, proper, safe, sufficient, satisfactory, suitable, etc., are used in these Rules and Regulations, they shall mean the standard of completeness, performance, propriety, or safety that is being maintained by the better maternity homes or related institutions as are then operating under permits granted by the State Board of Health.

In order to restrict the development of maternity homes to those which fill a definite need and to limit the intake of patients to the number the home is equipped to care for, the following rules and regulations are adopted:

BUILDINGS AND EQUIPMENT PRACTICES AND PROCEDURES WITHIN THE MATERNITY HOME

Construction of New Maternity Homes and Additions to Existing Maternity Homes

1. Any individual or group which proposes to build a new maternity home or any maternity home which proposes to construct an addition to, or materially alter the present construction of its building or buildings, shall comply with local building codes in all such construction. Compliance with such codes is necessary in order to obtain a permit to Operate a Maternity Home from the Georgia Department of Public Health.

Sound Construction and Good Repair

2. The maternity home buildings shall be of sound construction and shall be kept in good repair at all times.

3. Buildings used to house patients shall be of such construction that no hazards to the life and safety of patients and personnel exist. Buildings shall be capable of withstanding the weight and elements to which they are or may be subjected. The buildings shall be maintained so that there are no leaky roofs or walls, loose plaster, uneven flooring, broken windows, faulty equipment, and other undesirable conditions which may be placed in the category of poor maintenance. Heating equipment, electrical equipment and elevators shall be so constructed and maintained as to assure the safety of patients and personnel.

Fire Prevention

4. Buildings shall be approved by the local fire marshal or be in compliance with local and State fire regulations. If no fire regulations exist or are enforced by the local government or in case existing regulations do not include all the regulations hereinafter set forth, it shall be the responsibility of the owner or governing body of the maternity home to see to it that no fire hazards, endangering the lives and safety of patients and personnel, exist in the maternity home and that the following fire prevention regulations are observed.

5. All parts of the heating system shall be so constructed and maintained as to eliminate fire hazards. If the furnace or

boiler room is located in a building in which patients are housed, it shall be cut off from the rest of the building by use of fire-resistive material. Metal and asbestos protection shall be provided if steam pipes and hot water pipes are placed closer than two inches from woodwork.

6. Chimneys and stove pipes, if any, shall be thoroughly cleaned once a year. If stove pipes pass through closets or concealed places, pipes shall be properly insulated with approved fire-resistive material. All joints shall be riveted and properly supported.

7. No gas or oil heaters shall be used in rooms unless such heaters are directly connected with a flue which opens to the outside air. All gas connections shall be made of metal. Rubber tubing shall not be used as a connection for gas heaters.

8. Laundry chutes and shafts shall be lined with fire-resistive material and have close-fitting doors also lined with fire-resistive material. Such shafts shall not terminate in an attic. All elevator shafts shall be fire-resistant.

9. All electrical work shall comply with local ordinances and codes and/or with the National Electrical Code and Standards of the National Board of Fire Underwriters.

10. Storerooms, basements, attic lockers, and closets shall be kept free from accumulated combustible refuse. Non-usable mattresses shall be destroyed, and stored mattresses shall be arranged in small piles with sufficient space for access to all sides of the mattress pile, or placed in a fire-resistant room.

11. Paints, varnishes, oils and other highly combustible materials shall be stored in buildings used for housing patients only if placed in properly vented, fire-resistant rooms. Proper precautions shall be taken in the handling of all highly combustible materials. Oily cloths shall be kept in closed, metal containers.

12. Adequate facilities for the notification of local fire-fighting forces shall be readily accessible.

13. An acceptable fire extinguisher shall be available for use on each floor. Essential personnel shall be given periodic instruction in the use of such equipment. Fire extinguishers shall be checked at six month intervals to see that they are in good working order at all times. A record of this inspection shall be kept on a tag and attached to the extinguisher.

14. There shall be more than one means of egress leading to the outside of the building from each floor. Exits shall be located as near to the opposite ends of the building as practicable. Exits shall be indicated by the proper lights and signs. Such exits shall not be kept locked from the inside.

15. Proper precautions in the handling of combustible, explosive anesthetics and oxygen shall be taken. Containers not in use should be stored in a building apart from that used to house patients.

Vapor-proof electrical outlets and conductive flooring shall be installed in the delivery room or in any room in which gaseous anesthetics are used. High humidity shall be maintained in these rooms to reduce the possibility of static electricity initiating an explosion of anesthetic vapors.

Safety and Comfort of Patients and Personnel

16. Proper facilities insuring the safety and comfort of patients and personnel shall be provided.

17. The heating plant shall be adequate to maintain a temperature of 75 to 80 degrees Fahrenheit in severe weather in the nursery and delivery rooms, and 70 degrees Fahrenheit in other rooms used for patients.

18. Each patient's room shall be an outside room with a satisfactory amount of natural light. It is recommended that the window area be at least one-eighth of the floor area.

19. Every room, including the storerooms and the attic, shall have sufficient artificial lighting facilities so that all of the room shall be clearly visible under such artificial lighting. Hallways, stairways, inclines and ramps shall be adequately lighted to prevent accidents. All service rooms and work centers, such as medicine cabinets and nurses' charting desks shall be adequately lighted.

20. Emergency lighting facilities shall be provided and distributed so as to be readily available to the personnel on duty in the event of a power failure. This emergency equipment shall be periodically inspected to see that it is maintained in good working order. Flashlights and battery operated lamps are suggested. Open flame type lamps shall not be used.

21. The maternity home buildings shall be adequately ventilated at all times. Kitchens, bathrooms and service rooms

should be so located and ventilated by windows or mechanical means as to prevent offensive odors from entering patients' rooms and public corridors.

22. All stairways shall be provided with handrails and shall have a clearance of 48 inches. All open stairways shall be protected with guardrails.

23. Rooms extending below ground level shall not be used for patients unless such rooms are dry, well ventilated and otherwise suitable for occupancy.

24. Rooms shall be of sufficient size to allow not less than 80 square feet of floor space per patient in wards with at least three and one-half feet between beds and 100 square feet of floor space in private rooms. Doors to patients' rooms shall be at least three feet ten inches wide in order to permit easy removal of an occupied bed.

25. Corridors shall be at least eight feet wide.

26. A comfortable bed, with sufficient clean bedding and bed linen shall be provided for each patient.

27. Sufficient storage space shall be provided for the personal belongings of patients.

28. Signals shall be provided at each bed so that patients can summon the attendant on duty.

29. In case two or more patients occupy the same room, privacy shall be secured by means of screens or curtains.

30. Toilet facilities in reasonable ratio to the number and sex of the patients cared for, and located conveniently to patients' rooms, shall be provided.

31. Insofar as possible, quiet shall be maintained in the patient area.

32. Facilities for the preparation and serving of palatable and appetizing meals to patients shall be provided.

Transportation and Communication

33. There shall be proper means of transportation and communication to and from the maternity home.

34. The maternity home shall be served by a good road, kept passable at all times. Public transportation facilities should be

available. Adequate parking space for private automobiles should be provided.

35. Telephone connection with the local exchange shall be provided.

Cleanliness and Sanitation

36. Proper facilities for sanitation shall be provided throughout the maternity home buildings and premises for the purpose of insuring cleanliness and protection against infectious diseases.

37. The walls and floor of the maternity home shall be of a character to permit frequent washing, cleaning or painting.

38. The construction, maintenance and housekeeping of the maternity home shall be such as to prevent the entrance and harborage of rats, other rodents, and insects.

39. The water supply shall be of safe, sanitary quality, suitable for human use, and the supply system shall be approved by the Georgia Department of Public Health. The water shall be distributed to conveniently located taps throughout the buildings. Hot water shall be available at all times.

40. Sewage shall be discharged into a municipal sewerage system, where such a system is available; otherwise, the sewage shall be collected, treated, and disposed of in an independent sewerage system which is approved by the Georgia Department of Public Health.

41. The plumbing and drainage, or other arrangements for the disposal of excreta and infectious discharges and institutional wastes shall be in accordance with local codes and the standards approved by the Georgia Department of Public Health.

42. All garbage shall be disposed of in a manner which will not permit the transmission of disease, create a nuisance or provide a breeding place for flies. All containers for garbage shall be water-tight, have tight-fitting covers, be rodent-proof and be kept in a sanitary manner.

43. All outside doors, windows and other openings shall be screened with wire screen or its equivalent with not less than sixteen meshes per lineal inch. All screen doors shall open outward and be equipped with self-closing devices.

44. Incineration facilities or other approved methods for the disposal of infected dressings, obstetric wastes, and similar material shall be provided.

45. All handling of food shall conform with the ordinances and codes regulating eating and drinking establishments recognized by both the U. S. Public Health Service and the Georgia Department of Public Health.

46. Storerooms for food shall be clean and well ventilated. All food shall be stored so as to be protected from dust, flies, rodents, vermin, unnecessary handling, droplet infection, overhead leakage and other sources of contamination.

47. In places where food is stored, prepared or consumed, all poisonous chemicals and other sterilizing or rodent or insect poisoning materials shall be properly labeled, stored properly, and so handled as to avoid danger of poisoning humans.

48. Each maternity home shall have laundry facilities or make provision for the proper cleansing of linen and other washable goods. In case linen is sent to a commercial laundry, the person in charge of the maternity home should inspect such laundry from time to time.

49. All multi-use utensils used for eating, drinking, or in the preparation or serving of food shall be effectively cleaned and disinfected after each usage. Gross food particles should be removed by careful scraping and prerinsing in running hot water. Brushes, baskets or sprays are suggested. The dishes should be thoroughly washed in hot water 110 to 120 degrees Fahrenheit using an adequate amount of effective soap or detergent. Following this, the utensils should be rinsed in hot water to remove soap, and disinfected by one of the following methods:

- a. Immersion for at least 2 minutes in clean water at 170 degrees Fahrenheit.
- b. Immersion for at least one-half minute in boiling water.
- c. Immersion for at least 2 minutes in a luke warm chlorine solution containing at least 50 parts per million of available chlorine. Chlorine is not recommended for silverware. Cleansing of silver should be done using either (a) or (b) above.

Steam or hot water cabinets can be made effective. Results obtained with dishwashing machines should be equal to those

obtained by the methods outlined above. After disinfection, the utensils should be allowed to drain and dry in racks or baskets on non-absorbent surfaces. Drying cloths should not be used. Dishes should be stored in closed cupboards for protection against dust and moisture.

50. Glass-filling devices shall be constructed so as to prevent any contact of the upper one-third of the glass with the device, and in addition, so that no portion of the device extends into the glass.

51. All ice used in contact with food or drink shall be from a satisfactory source and handled and dispensed in a sanitary manner.

52. The milk supply shall meet local, State, and Georgia Department of Public Health requirements.

53. Hand-washing facilities, of the proper type, shall be provided throughout the maternity home, including examining, delivery and treatment rooms, main and diet kitchens, utility and other service rooms, toilet rooms, and rooms used for the isolation of patients. Soap, running water, and an adequate supply of towels shall be provided. Use of a common towel is prohibited. Lavatories in patients' rooms and wards are desirable.

54. There shall be provision for the proper sterilization of dressings, utensils, instruments and water. The maternity home should adopt a recognized method of checking sterilizer performance, such as thermocouple indicators connected to a constant recording instrument, use of a fusing control in the largest package of each load, or the bacteriological examination, at frequent intervals, of sterilized dressings. A cabinet or other suitable enclosure should be provided for keeping sterile equipment in a clean, convenient and orderly manner. Special precaution should be taken so that unsterile and sterile supplies are not mixed.

55. Adequate refrigeration facilities shall be provided in the maternity homes. Perishable food should be kept at a temperature below 50 degrees Fahrenheit in order to prevent deterioration. It is suggested that there be a reliable thermometer in each refrigerator. Biologicals and other drugs requiring refrigeration should be kept at the proper temperature as recommended by the pharmacopeia or the manufacturer. Food and

drugs should not be kept in the same refrigerator unless the drugs are properly protected against mold formation.

56. All facilities used in the care of patients shall be kept clean and sanitary, and in good order. Proper housekeeping standards shall be maintained throughout the maternity home.

Nursing Service

57. Sufficient equipment for nursing care, according to the type of patients accepted by the institution, shall be available.

58. A sufficient number of wash basins, mouthwash cups, and bedpans for the use of each individual patient shall be provided, or such utensils shall be disinfected after each using. Bedpan covers shall not be used interchangeably.

59. A sufficient number of clinical thermometers shall be available to permit adequate disinfection before using.

60. Hot water bags shall be covered and the temperature of the water carefully checked before placing in beds. Greatest care should be exercised to see that hot water bags do not leak. Electric heating pads shall be periodically checked by a qualified electrician.

61. Utility rooms shall be outside rooms with adequate lighting and ventilation. They should be conveniently located for the efficient conduct of work. There shall be adequate space and facilities for the proper cleansing and storage of nursing supplies and equipment.

62. Suitable provision shall be made for the preparation of medications and treatments.

63. All medicines, poisons and stimulants shall be plainly labeled and stored in a cabinet or storeroom accessible only to nursing personnel. Cabinets in which narcotics are stored shall, according to the Federal Narcotic Regulations, be securely locked and accessible only to the person in charge of the nursing unit. Remaining portions of compounded medications shall be destroyed after the patient for whom the drug preparation was ordered has been discharged.

64. The maternity home shall make provision for the isolation of contagious or communicable disease patients. Many maternity homes do not have specialized contagious disease departments, but do find it necessary from time to time to care

for patients with contagious disease. Isolation rooms shall have adjacent lavatories and toilets, and be located either at the end of a corridor or off a subcorridor. There should be adequate facilities for cleansing bedpans and other equipment. A separate utility room, equipped with sink and utensil sterilizer, should be provided.

65. The nursing staff shall compare favorably with that of the better maternity homes throughout the State of Georgia, and conform with generally accepted standards. The needs of the individual maternity home will determine the number of nurses to be employed.

Obstetrics

66. Facilities for the examination and preparation of patients as required by the attending physician shall be provided.

67. Immediate segregation and isolation of all mothers with infection, fever, or other conditions inimical to the safety and welfare of others shall be provided in a separate room.

68. Satisfactory provision shall be made for a patient in labor, either in the patient's room or a designated special labor room. Rooms for this purpose shall afford privacy, be conveniently located with reference to the delivery room, and be either sound-proofed or so located as to minimize the possibility of sound reaching other patients' rooms.

69. It is recommended that a special room be equipped as a delivery room. The delivery room should not be used for any other purpose, and should be used only for the delivery of non-infected patients. Patients with any evidence of infection or possible infection should be delivered in a separate room.

70. Delivery rooms shall be furnished with suitable stands for instruments, utensils and necessary supplies. An adequate supply of utensils and sterile linens, dressings, gloves and face masks shall be in readiness at all times. There shall be a suitable delivery table equipped for the treatment of shock. The pad shall be protected with waterproof sheeting in good condition.

71. If the maternity service is very small, it is permissible to use a patient's room for delivery, provided such room affords reasonable privacy, can be satisfactorily set up for de-

livery, and is thoroughly cleaned before use. The above requirements covering equipment and supplies for the delivery room also apply to deliveries performed in patients' rooms.

72. Sterile equipment for administration of blood transfusions and parenteral therapeutic solutions shall be readily available. There shall be available at all times equipment for general anesthesia, and a minimum of drugs and anesthetics ordinarily needed for such use.

73. A stretcher shall be provided for returning the patient to her own room.

74. If a nursery is provided, it shall be used for no purpose other than the care of newborn infants. The nursery shall be an outside room, so located as to receive sunlight some portion of the day. The nursery should be on the same floor as, and conveniently located with reference to, the mothers' rooms. All-activity rooms (combined sleeping and bathing rooms) shall have sufficient floor area to permit spacing of bassinets at least six inches apart, plus adequate space for necessary supplies and equipment, and for giving nursing care. There shall be ample space between rows of bassinets.

75. It is recommended that the total nursery space be divided into units in order to segregate the routine activities, such as preparation for work in the nursery, bathing and dressing of infants, preparation of feedings, or examination by physicians. In existing nurseries, where such division of space into unit rooms is not currently feasible, facilities and equipment may be arranged to permit separation of the several nursery activities by areas of the room. A glass observation window is recommended. Shades, screens or venetian blinds are suggested to shield infants from view during care or examination.

76. There shall be no less than sixteen square feet of floor space per bassinet in the nursery. The nursery shall be provided with a reliable room thermometer near the bassinets and at approximately bassinet level. Dry sweeping or dusting shall not be done in the nursery.

77. An instrument for measuring humidity is desirable in the nursery, especially in the sleeping rooms. If the air is too dry, means should be provided for maintaining desirable humidity.

78. Glass deflectors, or other effective window ventilators, are recommended as protection against dust and drafts. Acoustical ceiling treatment is recommended unless the nursery is in a separate wing, or otherwise well separated from rooms of patients.

79. A heated bassinet, crib or incubator shall be provided for the reception of each newborn infant. Incubators suitable for the care of premature infants shall be provided in the ratio of one incubator to twenty bassinets or fraction thereof. A separate bassinet shall be provided for each infant. Freshly laundered linings, blankets and linen shall be furnished each new occupant. Bassinets shall have firm, tightly fitting mattresses, covered with waterproof sheeting and washable pads. Washable inside linings shall be provided to obviate danger of injury to infants from bassinet bars, and as a preventive measure against the transmission of disease.

80. Equipment for resuscitation must be provided and facilities for the administration of oxygen shall be available.

81. Electric heating pads shall not be used in bassinets.

82. In case a common bathing table is in use, sterile pads shall be used to protect the infant. Each pad shall be sterilized or destroyed after use. If basins are used, a separate one shall be provided for each infant or the basin shall be sterilized after each use.

83. Covered cans for soiled linen shall be provided and emptied at frequent intervals. It is inadvisable for diaper rinsing to be carried on in the nursery. Nursery linen should be washed separately from other hospital linen, and care taken to avoid contamination of freshly laundered articles. Clean receptacles only shall be used to return nursery linen to the maternity department.

84. A sufficient number of rectal thermometers shall be provided in the nursery to permit adequate disinfection before using.

85. There shall be space and equipment for the preparation of milk mixtures and for their sterilization as near the nursery as possible. Bottles, nipples and utensils used in the preparation of milk mixtures shall be thoroughly washed and sterilized

before each use. Refrigeration shall be provided as near the nursery as possible. It is advised that all milk, not canned or powdered, be boiled.

86. It is recommended that infants' clothing be furnished by the maternity home. If infants' clothing is furnished by the mothers, precautions shall be taken to avoid introduction of vermin or infection into the nursery. Freshly laundered or destroyable diapers only should be used and should be available in necessary quantity.

87. Silver nitrate ampules for the prevention of infant blindness shall be kept on hand and instillation of silver nitrate solution (1%) shall be done before the infant is removed from the delivery room. (See Section 88-420, Georgia Code of 1933.) When requested, these ampules are furnished by the Georgia Department of Public Health.

88. Every infant shall be marked for identification by one of the reliable methods in common use, such as tape or name beads. Information shall be sufficient to identify infant with one and only one mother. If written tags are used, the ink shall be waterproof. Marking for identification shall be done immediately after delivery before the infant is removed from the delivery room, and the tag placed on the infant where it may be easily referred to whenever the infant is removed from his bassinet. The tag shall be removed only by the mother, or by a responsible person in the presence of the mother, at the time the infant is dressed to go home.

89. Immediate segregation and isolation of all infants with infections such as respiratory infections, skin rash and diarrhea shall be provided in a separate room or cubicle. All equipment shall be kept completely separate for each infant with infection. Infants born outside the maternity home shall be isolated for at least 72 hours after admission. A premature nursery shall be provided in case four or more premature bassinets are required.

90. Children should not be permitted to visit in the maternity home.

91. If at the time of admission a blood test for syphilis has not been performed sometime during the current pregnancy

of the patient, such test shall be performed within twenty-four hours. In the event that the mother delivers before a blood test is performed, a specimen of blood taken from the infant's cord at the time of delivery shall be tested for syphilis or such specimen shall be submitted to the Laboratory of the Georgia Department of Public Health for testing. Mailing outfits for submission of blood samples are furnished, on request, by the Georgia Department of Public Health, and a supply should be kept on hand for the convenience of the physician.

92. Each maternity home shall establish definite nursing procedures for delivery room and nursery, and for the antepartum and postpartum care of patients. In order to insure uniformity of practices within a maternity home, it is suggested that all routines be in written form, and available for reference.

93. The mother, or other responsible person who is to care for the child, shall be informed of any abnormalities or malformations existing at the time of discharge.

94. Instructions on feeding, and other instructions, should be given to the mother in accordance with the physician's recommendations. If further instruction is needed, it is suggested that the mother be referred to the local public health department, with the consent of the attending physician. The local health department or the Georgia Department of Public Health, Atlanta 3, Georgia, will furnish literature upon request for distribution to mothers.

95. No operator of a maternity home may place children in family homes under any circumstances. In case a mother who gives birth to a child in a maternity home desires assistance in placing the child, it shall be the responsibility of the home to refer her to the County Department of Public Welfare, or to such other agency as is legally qualified to assist in such placement.

96. No member of the maternity home staff, or employee of the maternity home, shall give information regarding an unmarried mother or her child except to persons legally authorized to receive such information.

97. Plans shall be made so that the infant, if normal and well, will not be left in the maternity home after discharge of

the mother, except in instances in which the mother's illness or death, or communicable disease in the household, makes it inadvisable for the infant to be cared for at home. This does not apply to the maternity home care of premature infants.

98. Infants born out of wedlock shall not be kept for care following the discharge of the mother except upon the joint approval of the physician and the welfare agency responsible for plans for the unmarried mother and child.

Service Equipment

99. The equipment and supplies necessary for proper protection, comfort, diagnosis and treatment of patients shall be provided within the limits of the services offered.

Practices and Procedures

100. All practices and procedures necessary for the proper protection, comfort, diagnosis and treatment of patients, within the limits of the services offered, and in accordance with the modern concept of good nursing care, shall be carried out.

PERSONNEL

Governing Body

101. Unless owned and operated by an individual, partnership or corporation, each maternity home shall have a governing body responsible for its maintenance and operation.

Medical Staff

102. In each maternity home the professional service to patients shall be performed by a medical staff appointed by the governing body of the institution.

Nursing Staff

103. There shall be one person who is definitely in charge of the nursing service of the maternity home. She may be either a registered or a practical nurse having sufficient experience to qualify her for responsibility for the care of the patients in the institution.

Service Personnel

104. There shall be sufficient service personnel to insure the comfort and protection of the patients.

Health of Personnel

105. All employees of the maternity home shall be free from communicable disease. Examination upon employment and yearly examinations thereafter are recommended for the control of communicable disease among personnel.

RECORDS

Clinical Records

106. Adequate, complete clinical records, sufficient to validate diagnosis and to establish the basis upon which treatment was given, shall be kept on each patient.

107. The clinical record of each patient shall include the following:

- a. Identification data: Name, Address, Age, Sex, Marital Status
- b. Date of Admission
- c. Complaint
- d. Result of Examination
- e. Diagnosis
- f. Medical Treatment
- g. Condition on discharge
- h. Date of Discharge
- i. Attending physician

108. All orders of physicians shall be written in ink or indelible pencil and signed by the physician in charge. Such orders shall be preserved on the patient's chart or in the established record of such orders. These orders and clinical records shall be preserved in accordance with standards which have been established by recognized standardizing agencies so that past records may be available to any doctor desiring information contained therein.

Operational Records

109. Records of patient statistics shall be kept by the maternity home and be submitted to the Georgia Department of Public Health upon request.

110. Operational records should be kept in such a way as to easily yield the following information:

- a. Daily patient record and count.
- b. Number of admissions or discharges per month and year.
- c. Number of patient days per month and year.

GENERAL REGULATIONS

111. Every maternity home shall comply with all laws and ordinances, rules and regulations which provide for the registration of births, deaths, and the reporting of communicable and other diseases.

112. Every maternity home shall protect its patients and the general public against the committing of any illegal act or acts within the institution, and the conduct therein of any practices detrimental to the welfare and general interest of its patients or the general public.

113. A maternity home must have an agreement with some well-equipped hospital whereby cases in which complications arise may be transferred to such hospital for care.

114. Maternity homes may not be licensed in communities where adequate maternity services are available in hospitals open to all licensed physicians.

115. A maternity home must be recommended and sponsored by one or more physicians in the community who will certify to the need for the home, be responsible for the delivery set-up, and maintain supervision over the care of mothers and babies in the home.

116. Patients may be accepted only upon the approval of a duly qualified physician except under emergency circumstances which make it impossible to obtain prior approval for the admission of the patient.

117. A maternity home shall restrict its service to maternity patients.

118. A maternity home shall not receive boarding children for care.

119. Solicitation of patients or use of advertising is disapproved.

The rules and regulations which have been adopted for hospitals receiving maternity patients have been modified for the maternity home in order to meet the conditions which arise from the limited space and facilities, and the restricted service of such homes.

Adopted by the State Board of Health on October 21, 1948.

Hospitals and Health Centers—Grants-in-Aid of Construction

GEORGIA LAWS 1949.

Section 1. That the State of Georgia be hereby authorized to make grants to any county, municipality, or any combination of the same, or any Hospital Authority to assist in the construction of public hospitals, or public health centers.

(a) Grants made pursuant to this Act shall be in an amount equal to one-third ($1/3$) of the allowable cost of construction of such hospitals or health centers provided that such a grant shall not exceed \$350,000.00.

(b) In the event the ratio of Federal grants authorized under Public Law 725 is increased by act of the Congress, the ratio of State grants authorized under this Act may bear a reduced per centum of the cost of such construction, provided that the aggregate of Federal and State grants shall not be less than $66 \frac{2}{3}$ per centum of the total allowable cost of such construction.

(c) Any grants made pursuant to this Act shall be in the following sequence of priority:

(1) "First consideration shall be given to the projects which shall have been approved for Federal aid, which have awarded construction contracts and on which construction was begun prior to January 1, 1949".

(2) "Second consideration shall be given to projects which shall have been approved for Federal aid and which on January 1, 1949 shall have had final working drawings and specifications approved by the United States Public Health Service".

(3) "Third consideration shall be given in date sequence of approval for Federal funds by the Surgeon General to projects which shall have been approved for Federal aid prior to January 1, 1949."

(4) "Fourth consideration shall be given to projects in a manner of priority approved by the Surgeon General of the United States Public Health Service."

(d) No part of the net earnings of hospitals constructed with the assistance of a grant under this act shall inure to the benefit of any private corporation or individual.

(e) Any grant made pursuant to this Act shall be contingent on the approval for that project of a Federal grant approved by the Surgeon General of the U. S. Public Health Service under the provisions of Public Law 725.

Section 2. That in order to assist the several counties, municipalities or any combination of the same; or any Hospital Authorities created under the "Hospital Authorities Law," there is hereby authorized to be appropriated for the fiscal year ending June 30, 1949 and for each of the succeeding fiscal years, the sum of \$3,000,000.00 for the construction of public hospitals and public health centers. Sums appropriated pursuant to this section for any given fiscal year for construction authorized by this Act and remaining unobligated at the end of such year shall remain available for such purpose for the next fiscal year (and for such year only), in addition to sums appropriated for such next fiscal year.

Section 3. That the State Board of Health is to be the sole agency for the administration of these State funds and that the administration of these funds will be done in direct conjunction with the administration of Federal funds under Public Law 725.

Section 4. That the terms "hospital", "public health center", "construction", or "cost of construction" whenever used or referred to in this Act, shall have the same meaning as the definition contained in Public Law 725.

Section 5. That the establishment of hospital service areas, the determination of relative need, the priority of projects, and the standards of construction shall be consistent with Public Law 725, and the Federal regulations prescribed thereunder.

Section 6. That in order to carry out the intent and administration of this Act, the State Board of Health is authorized to prescribe regulations not inconsistent with this Act, which shall have the binding force and effect of law.

Section 7. For each project of construction pursuant to this Act, there shall be submitted to the State Board of Health an application for these State funds.

(a) Upon approving an application under this section, the State Board of Health shall certify to the State Budget Bureau that such application has been approved and such certification shall constitute an obligation of the State of Georgia.

(b) Any appropriation under this Act shall be made to the State Board of Health to be used solely for payments due applicants for work performed or purchases made in carrying out approved projects. Any such funds received and not expended for the purposes of this Act shall be repaid to the State Treasurer.

(c) Payments to the sponsor of a construction project shall be made in installments as construction progresses at intervals to be determined in the discretion of the State Board of Health.

(d) If any hospital for which funds have been paid under this section shall at any time within 20 years after the completion of construction be sold or used for any purpose contrary to the provisions under which the grant was made, and such change in use is not approved by the State Board of Health, the State of Georgia shall be entitled to recover from either the transferor or the transferee such per centum of the then value of such hospital as the State grant bore to the total construction cost of that hospital, as determined by agreement of the parties or by action brought in court in the due process of law. (Acts 1949, pp. 263-266.)

Mattresses—Sanitary Regulations.

GEORGIA LAWS 1937.

Section 1. *Meaning of words.*—Unless the context clearly discloses a different meaning the following words, phrases and terms as used in this Act shall have the following meaning:

The word “mattress” means: Any mattress, upholstered spring, comforter, pad, cushion, upholstered furniture or pillow used for sleeping, and not smaller than twelve inches in its greatest dimensions.

The word “person” means: Any individual, corporation, partnership or association.

The term “new material” means: Any material which has not been used in the manufacture of another article or used for any other purpose.

The term “previously used material” means: (a) Any material which has been used in the manufacture of another article or used for any other purpose; (b) any material made into thread, yarn or fabric and subsequently torn, shredded, picked apart, or otherwise disintegrated, including jute and shearings.

The word “sell” or “sold” shall, in the corresponding tense, include: Sell, offer to sell, or deliver or consign in sale, or possess with intent to sell, deliver or consign in sale.

The word “sweeps” or “oily-sweeps” as used in the cotton waste trade shall be construed to mean “mill floor sweepings” and shall be classed as previously used material.

The word “felt” shall mean: Material which has been carded in layers by a Garnett machine.

All words shall include plural and singular as the context demands.

Section 2. *Health Department.*—Be it further enacted by the authority aforesaid, That the Department of Public Health, under the management and control of a Board of Health, through its duly authorized representatives, is hereby authorized and empowered to enforce all the provisions of this Act and the words “Board of Health” shall be construed to include any duly authorized representative thereof.

Section 3. *License to remake, etc.; Fee.*—Be it enacted by the authority aforesaid, That no person, except for his own use, shall make, remake or renovate mattresses until he has secured a license from the Board of Health and paid a license fee of twenty-five (\$25.00) dollars therefor; said license shall be valid for the calendar year in which issued or until voided by a violation of this Act. Provided a plant or place of business owned solely by blind persons in which place of business not more than one seeing assistant is employed in the manufacture or renovation of mattresses shall not be required to pay the tax herein provided or any other charges or taxes levied or to be collected under this Act.

Section 4. *Approval of description; Sterilized materials; Sales.*—Be it enacted by the authority aforesaid, That every person applying to the Board of Health for a license to make, remake or renovate mattresses shall furnish said Board a detailed drawing and description of any sterilizing apparatus and process to be used, which apparatus and process shall meet with the approval of the Board of Health before the applicant shall be entitled to a license, and no person shall in making, remaking or renovating a mattress for another person, use any previously used material which, since last used, was not sterilized by a process so approved by the Board of Health and no person shall sell a used mattress unless sterilized, since last used, by a process so approved by the Board of Health, provided that nothing in this Act shall be construed so as to prevent a public sale under due process of law or sale by an executor or an administrator of an estate.

Section 5. *Tags attached.*—Be it further enacted by the authority aforesaid, That any person who receives a mattress for renovation or storage shall keep attached thereto, from time he receives it, a tag on which is legibly written the notice of receipt and the name and address of the owner.

Section 6. *Stamps.*—Be it further enacted by the authority aforesaid, That no person shall make, remake, renovate or sell mattresses to which is not securely sewed a cloth or cloth-backed tag at least two by three inches in size to which is affixed an adhesive stamp, said adhesive stamp shall be provided and furnished by the Board of Health in lots of not less than two hundred and fifty to any one person at a time at a cost of

five (\$5.00) dollars per two hundred and fifty (250) stamps. Provided State Institutions engaged in the manufacture of mattresses for their own use or the use of any other State institution of this State shall not be required to use such stamps.

Section 7. *Details to be stamped.*—Be it further enacted by the authority aforesaid, That the cloth or cloth-backed tags provided for in Section 6 shall be legibly stamped or printed with ink in the English language (a) the name of the material or materials used to fill such mattresses; (b) the name and address of the maker or vendor of the mattress; (c) the words “Made of New Materials” if such mattress contains no previously used material; or the words “Made of Previously Used Materials” if such mattress contains any material classified as “Previously Used Material”; or the words “Second Hand” on any mattress which has been previously used but not remade. The words so stamped shall be in letters at least one-eighth of an inch high and the tag shall contain nothing of a misleading nature and shall be sewed to the outside cover of every mattress being manufactured before the filling material has been placed therein, and no person, other than a purchaser for his own use shall remove from a mattress or deface or alter the tag required by this Act.

Section 8. *Use of money collected.*—Be it further enacted by the authority aforesaid, That all money collected under this Act shall be paid to the Board of Health and be placed in a special fund, the same being hereby appropriated to the Department of Public Health for the purpose of the enforcement of this Act. The Board of Health being hereby authorized to use a sum not exceeding twenty-five (25%) per cent of the total amount collected for supervision and general expenses of the Department of Public Health and to expend the remainder of said moneys so collected for (a) salaries and expenses of inspectors and other employees who may be appointed and/or employed by the Board of Health to enforce the provisions of this Act.

Section 9. *Inspections.*—Be it further enacted by the authority aforesaid, That the Board of Health is hereby authorized and empowered in the enforcement of this Act to inspect, or by its duly authorized inspectors or representatives to have inspected every place where mattresses are made, remade, reno-

vated or sold or where material, which is used in the manufacture of mattresses, is mixed, worked or stored, and when a duly authorized representative of the Board of Health has evidence or good reason to believe that a mattress is not tagged or filled as required by this Act, he shall have authority to open a seam of such mattress for the purpose of examining the filling and shall likewise have authority and power to examine any purchase records or invoices necessary to determine the kind of material used in such mattress, and he shall have power to seize and hold for evidence any mattress or material made, possessed or offered for sale contrary to the provisions of this Act. The Board shall have power to require any person supplying material to a mattress manufacturer to furnish such manufacturer an itemized invoice of all materials so furnished. The manufacturer shall keep such invoice on file for one year, subject to the inspection of the Board of Health or any authorized representative thereof.

Section 10. *Violation of this Act; Revocation; New license.*—Be it further enacted by the authority aforesaid, That any person who fails to comply with the provisions of this Act, or who counterfeits the stamp provided in Section 6 of this Act, shall be guilty of a violation hereof, and each stamp so counterfeited and each mattress made, remade, renovated or sold contrary to this Act shall be a separate and distinct violation and offense. The Board of Health shall have power to revoke the license of any person convicted a second time of violating this Act. A new license shall not be issued to the offending person during a period of not less than six months after such a revocation, and then only upon a payment of another inspection fee of twenty-five (\$25.00) dollars for a new license.

Section 11. *Possession unlawful.*—Be it further enacted by the authority aforesaid, That the possession of one or more articles covered by this Act, when found in any store, warehouse or place of business other than a private home, hotel or other place where such articles are ordinarily used, shall constitute prima facie evidence that the article or articles so possessed are possessed with intent to sell or sterilize and sell the same.

Section 12. *Severability.*

Section 13. *Violation a misdemeanor.*—Be it further enacted

by the authority aforesaid, That any person who violates the provisions of this Act shall, upon conviction thereof, be adjudged guilty of a misdemeanor and fined not more than fifty (\$50.00) dollars or imprisoned for a term of not longer than three months, either or both, in the discretion of the court. (Acts 1937, pp. 719-725.)

Rules and Regulations Governing Manufacture, Renovation and Sale of Bedding.

Sterilization of mattresses and mattress materials as required by Section 4, Act of General Assembly, No. 472, approved March 30, 1937, shall be in accordance with the following method:

First Method—Dry Heat Sterilization: Loose materials or made-up mattresses shall be subject to dry heat at a temperature of 230° F., and maintained at that temperature for not less than one hour. Dry heat sterilization apparatus shall be equipped with recording thermometer and the chart records made of each period of sterilization must be kept on file and presented to the Department of Health Inspector who shall make inspections as necessary.

The box used for sterilization shall be large enough to guarantee six inch (6") all over clearance of any mattress or mattress material sterilized.

Heat may be obtained either from a circulating heater, gas heat, electricity, or steam. This box shall be air tight, and may be constructed either of wood, cement, brick or sheet iron, at the owner's discretion.

Second Method—Steam Sterilization: Loose mattress materials or made-up mattresses shall be subjected to direct steam under a pressure of 15 pounds per square inch and maintained at that pressure for 30 minutes, or at a pressure of 20 pounds per square inch and maintained at that pressure for a period of at least 20 minutes. Steam sterilization shall be equipped with recording thermometer and the chart records made of each period of sterilization must be kept on file and presented to the Department of Health Inspector who shall make inspections as necessary.

The bulb for the recording thermometer shall be installed at the furthest point from entry of heat.

Adopted by the State Board of Health on July 19, 1937.

Regulations Governing the Practice of Midwifery

Section 1. The term midwife shall be held to mean and include any person, other than a regularly licensed physician, who shall attend or who shall bargain, contract or agree to attend, any woman at or during childbirth.

Section 2. The term practice of midwifery shall be held to mean and include the practice of attending or assisting women in childbirth.

Section 3. It shall be the duty of every person in the State of Georgia who engages in the practice of midwifery to obtain a certificate from Georgia Department of Public Health and to register her* name, address and occupation with the local registrar of vital statistics in the district in which she resides or may hereafter establish a residence.

Section 4. It shall be the duty of the Director of the Georgia Department of Public Health to furnish a certificate of registration to every midwife who complies with these regulations. Said certificate shall be valid for a period of one year from the date upon which issued, and shall be renewed annually: Provided, however, that such certificate may be revoked at any time upon failure of the midwife to comply with these regulations.

Section 5. No person who is of unsound mind, or who is physically unable to engage in the practice of midwifery, or of disreputable or immoral character, or one infected with tuberculosis, venereal disease, or any other communicable disease, or who is a carrier of diphtheria or typhoid fever, or who is not cleanly as to person, clothing or equipment, shall be granted, or permitted to hold a certificate of registration.

Section 6. In order to become eligible for certification it shall be the duty of the midwife first to attend classes of instruction when notified by a duly authorized agent of the State Board of Health, to complete a course of lessons in the practice of midwifery prescribed by said board, and to pass a satisfactory examination before said board or its duly authorized

* Feminine pronoun should be construed to refer to both genders.

agent. Before any certificate shall be issued, the midwife shall submit a specimen of her blood for examination to the State Department of Public Health Laboratories; and be protected against smallpox by vaccination. She must agree to report promptly all births attended by her, as provided by law, to drop the silver nitrate solution in the infant's eyes, and to obey and carry out faithfully the following regulations governing the practice of midwifery:

Section 7. The midwife must provide, at her own expense, at all times, the following articles of equipment:

Gown or Apron

Mask

Cap

Towel

Blunt pointed scissors

Silver nitrate ampules for babies' eyes

Small covered container for boiling scissors, brush and orange sticks

Small bag containing brush, soap and orange sticks

Sterile package containing:

6 pieces of cotton

3 cord ties, each 9 inches long

Gauze dressing

In a large envelope, outside the lining, the following articles are kept:

Birth certificates

Midwife certificate

Pencil and notebook

Birth notification cards

Midwife Regulations

Georgia Mother and Baby Book

After each delivery, the bag lining, cap, gown, mask, towels, scissors, brush, and orange stick shall be washed, boiled and dried before the bag is used for another delivery.

The linen should also be ironed. Cleansing of the bag and its contents shall be done as promptly as possible, so that it will always be in readiness.

Section 8. The midwife shall not allow herself to be engaged on any case in which the blood test for syphilis has not been made, according to Georgia Laws, 1943, or in which any one of the following conditions is known or suspected to exist, or to have existed in past pregnancies:

- Difficult or prolonged labors
- Untreated syphilis
- Dwarfing or deformity
- Puffiness or swelling of face, hands, or limbs
- Excessive vomiting
- Dimness of vision
- Dizziness
- Bright flashes before the eyes
- Marked headache, persistent in character
- Convulsions
- Bleeding
- Foul smelling discharge

Where there is such a history either in past or present pregnancies or labor, the midwife shall insist on a physician being called. Should any such symptoms arise during the course of a labor in which she is in attendance, she shall advise that a physician be called immediately and refuse to assume further responsibility if it is possible to obtain a physician. If the midwife is unable to obtain a physician, but there is a hospital in the vicinity, the midwife shall take the patient there as an emergency.

Section 9. After labor has begun, the following preparations shall be made:

- Provide a plentiful supply of boiled water.
- Have the patient bathe and put on clean clothing.
- Provide and prepare the necessary articles to be used in connection with labor.
- The midwife shall wash her hands when she first comes to the patient's home, before she removes anything in her bag.
- She should keep her nails cut short, but not to the quick.

Immediately before delivery the midwife shall prepare herself as follows:

Put on her cap, gown or apron, and mask.

Scrub the hands and forearms with a brush, soap, and hot water for five minutes. After the midwife has scrubbed her hands, she shall not handle anything that is not equally clean.

Section 10. The patient shall be prepared as follows:

Bathe thoroughly with good white soap and water, the lower part of the abdomen, the skin surface of the thighs, and the external genitals. Then rinse with clear water.

Section 11. The midwife shall not give a vaginal douche before, during, or after labor, nor shall she apply grease or other lubricant to the vulva or vagina, or make a vaginal examination. She shall not interfere in any way with the natural course of labor, except to steady and support the head of the baby during the delivery in an attempt to prevent a laceration, making back pressure if a tear seems certain. She shall not use any instrument or drugs to assist delivery.

Section 12. If any of the following conditions occur during the course of labor, the midwife shall call for a physician immediately, or take the patient to a hospital:

If a hand, foot or buttock is born first.

If the cord drops down and appears at the vagina.

If the vulva shows unusual swelling.

If the patient should have convulsions, and/or complains of severe headache, blindness and flashes of fire before her eyes.

If the pains gradually cease after active labor pains have begun and continued for some time.

If hard labor pains continue a long time without any apparent progress.

If the patient shows signs of exhaustion or should faint.

If there should be a vaginal bleeding other than a slight show.

If there is an abnormality or obstruction at the birth canal.

If the afterbirth is not delivered within two hours of the

birth of the baby. If this condition is accompanied by bleeding a doctor should be called at once.

The midwife shall not under any circumstances introduce her finger or hand into the vagina, or pull on the cord, to deliver the afterbirth. If the afterbirth is not delivered within one hour, an attempt may be made to stimulate contractions by gently kneading the womb, which can be felt plainly as a large mass in the abdomen.

Section 13. Immediately after birth the infant's eyes shall be wiped gently with sterile cotton without opening the lids, a separate piece of cotton being used for each eye. The eyelids shall then be separated and a drop of one per cent silver nitrate solution shall be placed in each eye. The cord shall be tied tightly with the sterile cord tie and a dry sterile cord dressing applied around the cord stump.

Section 14. If any of the following conditions affecting the mother or baby occur just after delivery or during the course of the lying-in period, the midwife shall call a physician immediately:

Mother:

Where none or only a portion of the afterbirth is delivered.
Marked or unusual bleeding.

Convulsions.

Failure to pass urine, or too small an amount, within twelve hours.

Chills or rigors.

Sudden rise of fever or fever lasting for more than one day.

Foul odor or early checking of the discharge, particularly if associated with chill and fever.

Onset of any acute illness during lying-in period.

Red, swollen or hard breasts or cracked nipples.

Baby:

If the baby is premature, undeveloped, or shows signs of physical weakness.

If there are any injuries, malformations or deformities.

If the skin around the cord shows signs of infection, such as redness, swelling, pain, or pus.

If there is bleeding from any portion of the body, such as bowels, cord, mouth, ear or nose.

If there is a rash, sore, or other signs of disease.

If the baby is unable to nurse properly.

If the baby develops any acute illness.

If the baby cannot pass water or the bowels do not move within twenty-four hours.

If there is any swelling or redness of the eyes or eyelids.

Law of 1918 says:

“Section 1. That it shall be the duty of any person who shall be in attendance on any childbirth to apply to the child such prophylactic treatment as may be prescribed by the State Board of Health . . . to prevent blindness from gonococcus infection.

“Section 2. That any person who shall nurse or attend any infant shall report any inflammation of the eyes of said child that shall develop within two weeks after birth to the local health officer or to a licensed physician.”

Violation of this law is punishable as a misdemeanor.

Section 15. If there is any swelling or redness of the eyes or eyelids, this condition shall be reported immediately to the local health officer, or, in a city or county where there is no health officer, to a physician and also directly to the State Board of Health.

Section 16. Within 48 hours after the birth of the child the midwife shall fill out, and file with the county health department the Confidential Medical Report of Birth as required by law. If there is no Health Department in the county, the Confidential Medical Report of Birth shall be sent directly to the Georgia Department of Public Health. The Report of Birth signed by the parent shall be filed with the local registrar of vital statistics in whose district the birth occurred within ten days after the birth of the child. If a woman, pregnant five months or more, gives birth to a dead infant, a Certificate of

Stillbirth shall be filed with the local registrar within ten days. If no physician attended this stillbirth, the certificate must be signed by the County or City Health Officer or coroner.

Section 17. It shall be unlawful for any person who does not hold a certificate of registration to engage in the practice of midwifery in Georgia. Only a person who complies with these requirements shall be entitled to receive and retain such a certificate.

Section 18. Penalties. Failure to comply with the provisions of any section or sub-section of these rules and regulations shall constitute a violation thereof and shall be punishable as provided for in Sections 88-99 and 88-112 of the Georgia Code of 1933.

Adopted by the State Board of Health on January 28, 1925, re-enacted October 20, 1933, revised April 28, 1949.

Resolution on United States Public Health Service Milk Ordinance and Code — 1940

BE IT RESOLVED, That the Board of Health of the State of Georgia, in regular session assembled in Atlanta on March 20, 1940, takes cognizance of the value of the "Milk Ordinance and Code" approved by the United States Public Health Service of the Federal Security Agency and by the Bureau of Dairy Industry of the United States Department of Agriculture, and adopts this ordinance of January, 1939, and any subsequent revisions thereof for the express purpose of promoting the sanitary production of milk and the prevention of diseases which may be transmitted through the milk supply.

Adopted by the State Board of Health on March 20, 1940.

Resolution on United States Public Health Service Milk Ordinance and Code – 1943

WHEREAS, there has recently occurred in a city in one of our adjoining states a milk-borne outbreak in which 70 citizens, including soldiers and civilians, became ill, the State health officer of that State is quoted as follows: "This furnishes undisputable support of the position taken by the State Board of Health against the pooling of low grade and high grade milk and its distribution under dishonest labels. In view of this situation and of another city's action on abolishing labels for milk, taken by the county board of health Tuesday night, the time has come, it seems to me, when the public should be apprised of the facts in this important matter and of the potential dangers to which such a short-sighted policy would expose our people."

"It is well in this connection also to advise the consuming public just what diseases may be transmitted through milk. According to Dr. Milton J. Rosenau, world renowned authority on preventive medicine, these include tuberculosis, scarlet fever, typhoid and paratyphoid fever, infantile paralysis, food infection, diphtheria, Septic sore throat, Malta fever, undulant fever, foot and mouth disease, milk sickness, diarrhea, dysentery and epidemic arthritic erythema."

He further states that since the milk shortage in his state has become so acute that pressure groups, local and national, have endeavored to prevail upon the State Board of Health to recommend that milk regulations be lowered or abrogated whereby low grade, potentially unsafe milk could be legally sold to the public under dishonest labels.

He further states that at two official meetings, the State Board of Health refused to lower milk regulations, or to recommend the pooling of high and low grade milk or to abolish the proper labeling and grading of milk and milk products.

He further states that in this action his state board has the endorsement of the following:

The United States Public Health Service.

The United States Public Health Service Liaison Officer, 4th Service Command.

All local health officers in his state.

The Consumers Association of his state, and other organizations.

"Thus," he states, "the U. S. Public Health Service, the State Board of Health, the Army and Navy, the producing farmers, the State and Territorial Health Officers, the local Health Officers and the public stand united in refusing to subscribe to the abolishment of grading and labeling of milk and any let down in the Public Health control of milk supplies." Therefore

BE IT RESOLVED, That the Board of Health of the State of Georgia in regular session assembled in Atlanta on March 18, 1943, deplores the position taken by those pressure groups who would have grading and labeling of milk abolished in order to legalize the practice of taking low grade potentially dangerous milk and selling it to the public as a high grade product contrary to the opinions of those who would protect the health of the public. The Board again takes cognizance of the value of the United States Public Health Service Milk Ordinance and Code and recommends that grading and labeling of all milk and milk products should continue in accordance with the provisions of this Standard Ordinance. The Board further recommends that copies of this resolution together with copies of policies expressed by health authorities of other states be forwarded to the local health departments in Georgia.

Adopted by the State Board of Health on March 18, 1943.

Rules and Regulations for Milk Sanitation

This first day of November, 1944, under authority of Sections 88-107, 88-112, and 88-117 of the Georgia Code of 1933, the Georgia State Board of Health, in addition to the enacted laws, hereby adopts the following rules and regulations for the prevention and spread of contagious and infectious diseases.

Section 1. *Definitions.*—The following definitions shall apply in the interpretation and the enforcement of these regulations:

A. *Milk*.—Milk is hereby defined to be the lacteal secretion obtained by the complete milking of one or more healthy cows, excluding that obtained within 15 days before and 5 days after calving, or such longer period as may be necessary to render the milk practically colostrum free; which contains not less than 8 per cent of milk solids not fat, and not less than $3\frac{1}{4}$ per cent of milk fat.

B. *Milk fat or butter fat*.—Milk fat or butter fat is the fat of milk.

C. *Cream and sour cream*.—Cream is a portion of milk which contains not less than 18 per cent milk fat. Sour cream is cream the acidity of which is more than 0.20 per cent, expressed as lactic acid.

D. *Skimmed Milk*.—Skimmed milk is milk from which a sufficient portion of milk fat has been removed to reduce its milk-fat percentage to less than $3\frac{1}{4}$ per cent.

E. *Milk or skimmed-milk beverage*.—A milk beverage or a skimmed milk beverage is a food compound or confection consisting of milk or skimmed milk, as the case may be, to which has been added a sirup or flavor consisting of wholesome ingredients.

F. *Buttermilk*.—Buttermilk is a product resulting from the churning of milk or cream, or from the souring or treatment by a lactic acid or other culture of milk, skimmed milk, reconstituted skimmed milk, evaporated or condensed milk or skimmed milk, or milk or skimmed-milk powder. It contains not less than 8 per cent of milk solids not fat.

G. *Vitamin D milk*.—Vitamin D milk is milk the vitamin D content of which has been increased by a method and in an amount approved by the health officer.

H. *Reconstituted or recombined milk and cream*.—Reconstituted or recombined milk is a product resulting from the recombining of milk constituents with water, and which complies with the standards for milk fat and solids not fat of milk as defined herein. Reconstituted or recombined cream is a product resulting from the combination of dried cream, butter, or butter fat with cream, milk, skimmed milk, or water.

I. *Goat Milk*.—Goat milk is the lacteal secretion, free from

colostrum, obtained by the complete milking of healthy goats, and shall comply with all the requirements of this promulgation. The word "cows" shall be interpreted to include goats.

J. *Homogenized Milk*.—Homogenized milk is milk which has been treated in such manner as to insure break-up of the fat globules to such an extent that after 48 hours storage no visible cream separation occurs on the milk and the fat percentage of the top 100 cc. of milk in a quart bottle, or of proportionate volumes in containers of other sizes, does not differ by more than 5 per cent of itself from the fat percentage of the remaining milk as determined after thorough mixing.

K. *Milk Products*.—Milk products shall be taken to mean and include cream, sour cream, homogenized milk, goat milk, vitamin D milk, buttermilk, skimmed milk, reconstituted or recombined milk and cream, milk beverages, skimmed-milk beverages, and any other product made by the addition of any substance to milk or any of these products and used for similar purposes and designated as a milk product by the health officer.

L. *Pasteurization*.—The terms "pasteurization," "pasteurized," and similar terms shall be taken to refer to the process of heating every particle of milk or milk products to at least 143° F., and holding at such temperature for at least 30 minutes in pasteurization apparatus approved by the health officer, or to at least 160° F., and holding at such temperature for at least 15 seconds, in apparatus designed and operated in accordance with specifications approved by the health officer: Provided, that nothing contained in this definition shall be construed as disbaring any other process which has been demonstrated to be equally efficient and is approved by the health authority.

M. *Adulterated milk and milk products*.—Any milk or milk product which contains any unwholesome substance, or which if defined herein does not conform with its definition, or which carries a grade label unless such grade label has been awarded by a health officer and not revoked, shall be deemed adulterated and misbranded.

N. *Milk Producer*.—A milk producer is any person who owns or controls one or more cows a part or all of the milk or milk products from which is sold or offered for sale.

O. *Milk Distributor*.—A milk distributor is any person who

offers for sale or sells to another any milk or milk products for human consumption as such.

P. *Dairy or dairy farm*.—A dairy or dairy farm is any place or premises where one or more cows are kept, a part or all of the milk or milk products from which is sold or offered for sale.

Q. *Milk Plant*.—A milk plant is any place or premises or establishment where milk or milk products are collected, handled, processed, stored, bottled, pasteurized, or prepared for distribution.

R. The term “health officer” shall mean the director of the Georgia Department of Public Health, the legally appointed health officer of a city and/or county or a duly authorized representative.

S. *Average bacterial plate count, direct microscopic count, reduction time, and cooling temperature*.—Average bacterial plate count and average direct microscopic count shall be taken to mean the logarithmic average, and average reduction time and average cooling temperature shall be taken to mean the arithmetic average, of the respective results of the last four consecutive samples, taken upon separate days, irrespective of the date of grading or regrading.

T. *Grading Period*.—The grading period shall be such period of time as the health officer may designate within which grades shall be determined for all milk and milk products, provided that the grading period shall in no case exceed 6 months.

U. *Person*.—The word “person” as used in these specifications shall mean “person, firm, corporation, or association.”

V. *And/or*.—Where the term “and/or” is used “and” shall apply where possible, otherwise “or” shall apply.

Section 2. *The sale of adulterated, misbranded, or ungraded milk or milk products prohibited*.—No person shall within a city which has adopted a milk grading and labeling ordinance, or its police jurisdiction, produce, sell, offer, or expose for sale, or have in possession with intent to sell, any milk or milk product which is adulterated, misbranded, or ungraded. It shall be unlawful for any person, elsewhere than in a private home, to have in possession any adulterated, misbranded, or ungraded milk or milk product.

Section 3. *Permits.*—It shall be unlawful for any person to bring into or receive into a city which has adopted these grade specifications, or its police jurisdiction, for sale, or to sell, or offer for sale therein, or to leave in storage where milk or milk products are sold or served, any milk or milk product defined in this promulgation, who does not possess a permit from the health officer of the city.

Only a person who complies with these requirements shall be entitled to receive and retain such a permit.

Such a permit may be suspended by the health officer, or revoked after an opportunity for hearing by the health officer, upon the violation by the holder of any of these specifications and requirements.

Section 4. *Labeling and placarding.*—All bottles, cans, packages, and other containers enclosing milk or any milk product defined in these specifications shall be plainly labeled or marked with (1) the name of the contents as given in the definitions in this promulgation; (2) the grade of the contents; (3) the word “pasteurized” only if the contents have been pasteurized; (4) the word “raw” only if the contents are raw; (5) the phrase “for pasteurization” if the contents are to be pasteurized; (6) the name of the producer if the contents are raw, and the name of the plant at which the contents were pasteurized, if the contents are pasteurized; and (7) in the case of vitamin D milk, the designation “Vitamin D Milk” and the source of the vitamin D. The label or mark shall be in letters of a size, kind, and color approved by the health officer and shall contain no marks or words which are misleading.

Every restaurant, cafe, soda fountain, or other establishment serving milk or milk products shall display at all times, in a place designated by the health officer, a notice approved by the health officer, stating the lowest grade of milk and/or milk products served.

Section 5. *Inspection of dairy farms and milk plants for the purpose of grading or regrading.*—At least once during each grading period the health officer shall inspect all dairy farms and all milk plants whose milk or milk products are to be graded and labeled according to these specifications and requirements. In case the health officer discovers the violation of any item

of sanitation, he shall make a second inspection after a lapse of such time as he deems necessary for the defect to be remedied, but not before the lapse of 3 days; and the second inspection shall be used in determining the grade of milk and/or milk products. Any violation of the same item or these specifications and requirements on two consecutive inspections shall call for immediate degrading.

One copy of the inspection report shall be posted by the health officer in a conspicuous place upon an inside wall of one of the dairy farm or milk plant buildings, and said inspection report shall not be defaced or removed by any person except the health officer. Another copy of the inspection report shall be filed with the records of the health department.

Section 6. *The examination of milk and milk products.*—During each grading period at least four samples of milk and cream from each dairy farm and each milk plant shall be taken on separate days and examined by the health officer. Samples of other milk products may be taken and examined by the health officer as often as he deems necessary. Samples of milk and milk products from stores, cafes, soda fountains, restaurants, and other places where milk or milk products are sold shall be examined as often as the health officer may require. Bacterial plate counts and direct microscopic counts shall be made in conformity with the latest standard methods recommended by the American Public Health Association. Examinations may include such other chemical and physical determinations as the health officer may deem necessary for the detection of adulteration, these examinations to be made in accordance with the latest standard methods of the American Public Health Association and the Association of Official Agricultural Chemists. Samples may be taken by the health officer at any time prior to the final delivery of the milk or milk products. All proprietors of stores, cafes, restaurants, soda fountains, and other similar places shall furnish the health officer, upon his request, with the names of all distributors from whom their milk and milk products are obtained. Bio-assays of the vitamin D content of vitamin D milk shall be made when required by the health officer in a laboratory approved by him for such examinations.

Whenever the average bacterial count, the average reduction time, or the average cooling temperature falls beyond the limit

for the grade then held, the health officer shall send written notice thereof to the person concerned, and shall take an additional sample, but not before the lapse of 3 days, for determining a new average in accordance with section 1 (S). Violation of the grade requirement by the new average or by any subsequent average during the remainder of the current grading period shall call for immediate degrading or suspension of the permit, unless the last individual result is within the grade limit.

Section 7. *The grading of milk and milk products.*—At least once every 6 months the health officer shall announce the grades of all milk and milk products delivered by all producers or distributors if said milk is graded according to these grade specifications and regulations. Said grades shall be based upon the following standards, the grading of milk products being identical with the grading of milk except that the bacterial standards shall be doubled in the case of cream, and omitted in the case of sour cream and buttermilk. Vitamin D milk shall be only of grade A or grade B pasteurized, certified, or grade A raw quality.

Certified Milk-raw.—Certified milk-raw is raw milk which conforms with the requirements of the American Association of Medical Milk Commissions in force at the time of production and is produced under the supervision of a medical milk commission and of the State Board of Health or of the city or county health officer.

Grade A raw milk.—Grade A raw milk is raw milk the average bacterial plate count of which as determined under sections 1 (S) and 6 of this ordinance does not exceed 50,000 per cubic centimeter, or the average direct microscopic count of which does not exceed 50,000 per cubic centimeter if clumps are counted or 200,000 per cubic centimeter if individual organisms are counted, or the average reduction time of which is not less than 8 hours: Provided, That if it is to be pasteurized the corresponding limits shall be 200,000 per cubic centimeter, 200,000 per cubic centimeter, 800,000 per cubic centimeter, and 6 hours, respectively; and which is produced upon dairy farms conforming with all of the following items of sanitation.

Item 1r. *Cows, tuberculosis, and other diseases.*—Except as provided hereinafter, a tuberculin test of all herds and additions thereto shall be made before any milk therefrom is sold, and at

least once every 12 months thereafter, by a licensed veterinarian approved by the State livestock sanitary authority. Said tests shall be made and reactors disposed of in accordance with the requirements approved by the United States Department of Agriculture, Bureau of Animal Industry, for accredited herds. A certificate signed by the veterinarian or attested to by the health officer and filed with the health officer shall be evidence of the above test: Provided, That in modified accredited counties in which the modified accredited area plan is applied to the dairy herds the modified accredited area system approved by the United States Bureau of Animal Industry may be accepted in lieu of annual testing.

Within 5 years from the date of this promulgation all milk and milk products consumed raw shall be from herds or additions thereto which have been found free from Bang's disease, as shown by blood serum tests for agglutinins against *Brucella abortus* made in a laboratory approved by the health officer. All such herds shall be retested at least every 12 months and all reactors removed from the herd. A certificate identifying each animal by number, and signed by the laboratory making the test, shall be evidence of the above test.

Cows which show an extensive or entire induration of one or more quarters of the udder upon physical examination, whether secreting abnormal milk or not, shall be permanently excluded from the milking herd. Cows giving bloody, stringy, or otherwise abnormal milk, but with only slight induration of the udder, shall be excluded from the herd until re-examination shows that the milk has become normal.

For other diseases such tests and examinations as the health officer may require shall be made at intervals and by methods prescribed by him, and any diseased animals or reactors shall be disposed of as he may require.

Item 2r. *Dairy barn, lighting.*—A dairy or milking barn shall be required and in such sections thereof where cows are milked, windows shall be provided and kept clean and so arranged as to insure adequate light properly distributed, and when necessary shall be provided with adequate supplementary artificial light.

Item 3r. *Dairy barn, air space and ventilation.*—Such sec-

tions of all dairy barns where cows are kept or milked shall be well ventilated and shall be so arranged as to avoid overcrowding.

Item 4r. *Dairy barn, floors.*—The floors and gutters of such parts of all dairy barns in which cows are milked shall be constructed of concrete or other approved impervious and easily cleaned material, provided that if the milk is to be pasteurized, tight wood may be used, shall be graded to drain properly, and shall be kept clean and in good repair. No horses, pigs, fowl, calves, etc., shall be permitted in parts of the barn used for milking.

Item 5r. *Dairy barn, walls and ceilings.*—The walls and ceilings of all dairy barns shall be whitewashed once each year or painted once every 2 years, or oftener, if necessary, or finished in an approved manner, and shall be kept clean and in good repair. In case there is a second story above that part of the barn in which cows are milked, the ceiling shall be tight. If the feed room adjoins the milking space, it shall be separated therefrom by a dust-tight partition and door. No feed shall be stored in the milking portion of the barn.

Item 6r. *Dairy barn, cowyard.*—All cowyards shall be graded and drained as well as practicable and kept clean.

Item 7r. *Manure disposal.*—All manure shall be removed and stored or disposed of in such manner as best to prevent the breeding of flies therein or the access of cows to piles thereof.

Item 8r. *Milk house or room, construction.*—There shall be provided a milk house or milk room in which the cooling, handling, and storing of milk and milk products and the washing, bactericidal treatment, and storing of milk containers and utensils shall be done. (a) The milk house or room shall be provided with a tight floor constructed of concrete or other impervious material, in good repair, and graded to provide proper drainage. (b) It shall have walls and ceilings of such construction as to permit easy cleaning, and shall be kept well painted or finished in an approved manner. (c) It shall be well lighted and ventilated. (d) It shall have all openings effectively screened including outward-opening, self-closing doors, unless other effective means are provided to prevent the entrance of flies. (e) It shall be used for no other purposes than those specified

above except as may be approved by the health officer; shall not open directly into a stable or into any room used for domestic purposes; shall, unless the milk is to be pasteurized, have water piped into it; shall be provided with adequate facilities for the heating of water for the cleaning of utensils; shall be equipped with two-compartment stationary wash and rinse vats, except that in the case of retail raw milk, if chlorine is employed as the principal bactericidal treatment, the three-compartment type must be used; and shall, unless the milk is to be pasteurized, be partitioned to separate the handling of milk and the storage of cleansed utensils from the cleaning and other operations, which shall be so located and conducted as to prevent any contamination of the milk or of cleaned equipment.

Item 9r. *Milk house or room, cleanliness and flies.*—The floors, walls, ceiling, and equipment of the milk house or room shall be kept clean at all times. All means necessary for the elimination of flies shall be used.

Item 10r. *Toilet.*—Every dairy farm shall be provided with one or more sanitary toilets conveniently located and properly constructed, operated, and maintained, so that the waste is inaccessible to flies and does not pollute the surface soil or contaminate any water supply.

Item 11r. *Water supply.*—The water supply for the milk room and dairy barn shall be properly located, constructed, and operated, and shall be easily accessible, adequate, and of a safe sanitary quality.

Item 12r. *Utensils, construction.*—All multi-use containers or other utensils used in the handling, storage, or transportation of milk or milk products must be made of smooth non-absorbent material and of such construction as to be easily cleaned, and must be in good repair. Joints and seams shall be soldered flush. Woven wire cloth shall not be used for straining milk. All milk pails shall be of a small-mouth design approved by the health officer. The manufacture, packing, transportation, and handling of single-service containers and container caps and covers shall be conducted in a sanitary manner.

Item 13r. *Utensils, cleaning.*—All multi-use containers, equipment, and other utensils used in the handling, storage, or transportation of milk and milk products must be thoroughly cleaned after each usage.

Item 14r. *Utensils, bactericidal treatment*.—All multi-use containers, equipment, and other utensils used in the handling, storage, or transportation of milk or milk products shall between each usage be subjected to an approved bactericidal process with steam, hot water, chlorine, or hot air.

Item 15r. *Utensils, storage*.—All containers and other utensils used in the handling, storage, or transportation of milk or milk products shall be stored so as not to become contaminated before being used.

Item 16r. *Utensils, handling*.—After bactericidal treatment no container or other milk or milk product utensil shall be handled in such manner as to permit any part of any person or his clothing to come in contact with any surface with which milk or milk products come in contact.

Item 17r. *Milking, udders and teats, abnormal milk*.—The udders and teats of all milking cows shall be clean and rinsed with a bactericidal solution at the time of milking. Abnormal milk shall be kept out of the milk supply and shall be so handled and disposed of as to preclude the infection of the cows and the contamination of milk utensils.

Item 18r. *Milking, flanks*.—The flanks, bellies, and tails of all milking cows shall be free from visible dirt at the time of milking.

Item 19r. *Milkers' hands*.—Milkers' hands shall be clean, rinsed with a bactericidal solution, and dried with a clean towel immediately before milking and following any interruption in the milking operation. Wet-hand milking is prohibited. Convenient facilities shall be provided for the washing of milkers' hands.

Item 20r. *Clean clothing*.—Milkers and milk handlers shall wear clean outer garments while milking or handling milk, milk products, containers, utensils, or equipment.

Item 21r. *Milk stools*.—Milk stools shall be kept clean.

Item 22r. *Removal of milk*.—Each pail of milk shall be removed immediately to the milk house or straining room. No milk shall be strained or poured in the dairy barn.

Item 23r. *Cooling*.—Milk must be cooled immediately after completion of milking to 50° F., or less, and maintained at that

average temperature, as defined in Section 1 (S), until delivery. If milk is delivered to a milk plant or receiving station for pasteurization or separation, it must be delivered within 2 hours after completion of milking or cooled to 60° F., or less, and maintained at that average temperature until delivered.

Item 24r. *Bottling and capping*.—Milk and milk products shall be bottled from a container with a readily cleanable valve, or by means of an approved bottling machine. Bottles shall be capped by machine. Caps or cap stock shall be purchased in sanitary containers and kept therein in a clean dry place until used.

Item 25r. *Personnel, health*.—The health officer or a physician authorized by him shall examine and take careful morbidity history of every person connected with a retail raw dairy, or about to be employed, whose work brings him in contact with the production, handling, storage, or transportation of milk, milk products, containers, or equipment. If such examination or history suggests that such person may be a carrier of or infected with the organisms of typhoid or paratyphoid fever or any other communicable diseases likely to be transmitted through milk, he shall secure appropriate specimens of body discharges and cause them to be examined in a laboratory approved by him or by the State health authorities for such examinations, and if the results justify such person shall be barred from such employment.

Such persons shall furnish such information, submit to such physical examinations, and submit such laboratory specimens as the health officer may require for the purpose of determining freedom from infection.

Item 26r. *Miscellaneous*.—All vehicles used for the transportation of milk or milk products shall be so constructed and operated as to protect their contents from the sun and from contamination. All vehicles used for the transportation of milk or milk products in their final delivery containers shall be constructed with permanent tops and with permanent or roll-down sides and backs, provided that openings of the size necessary to pass the delivery man may be permitted in the sides or back for loading and unloading purposes. All vehicles shall be kept clean, and no substance capable of contaminating milk or milk products shall be transported with milk or milk prod-

ucts in such manner as to permit contamination. All vehicles used for the distribution of milk or milk products shall have the name of the distributor prominently displayed.

The immediate surroundings of the dairy shall be kept in a neat, clean condition.

Grade B raw milk.—Grade B raw milk is raw milk which violates the bacterial standard and/or the abortion testing requirement for grade A raw milk, but which conforms with all other requirements for grade A raw milk, and has an average bacterial plate count not exceeding 1,000,000 per cubic centimeter, or an average direct microscopic count not exceeding 1,000,000 per cubic centimeter if clumps are counted or 4,000,000 per cubic centimeter if individual organisms are counted, or an average reduction time of not less than 3½ hours, as determined under sections 1 (S) and 6.

Grade C raw milk.—Grade C raw milk is raw milk which violates any of the requirements for grade B raw milk.

Certified milk-pasteurized.—Certified milk-pasteurized is certified milk-raw which has been pasteurized, cooled, and bottled in a milk plant conforming with the requirements for grade A pasteurized milk.

Grade A pasteurized milk.—Grade A pasteurized milk is grade A raw milk, with such exceptions as are indicated if the milk is to be pasteurized, which has been pasteurized, cooled, and bottled in a milk plant conforming with all of the following items of sanitation and the average bacterial plate count of which at no time after pasteurization and until delivery exceeds 30,000 per cubic centimeter, as determined under sections 1 (S) and 6.

The grading of a pasteurized milk supply shall include the inspection of receiving and collecting stations with respect to items 1p and 15p, inclusive, and 17p, 19p, 22p, and 23p, except that the partitioning requirement of item 5p shall not apply.

Item 1p. *Floors.*—The floors of all rooms in which milk or milk products are handled or stored or in which milk utensils are washed shall be constructed of concrete or other equally impervious and easily cleaned material and shall be smooth, properly drained, provided with trapped drains, and kept clean.

Item 2p. *Walls and ceilings*.—Walls and ceilings of rooms in which milk or milk products are handled or stored or in which milk utensils are washed shall have a smooth, washable, light-colored surface and shall be kept clean.

Item 3p. *Doors and windows*.—Unless other effective means are provided to prevent the access of flies, all openings into the outer air shall be effectively screened and doors shall be self-closing.

Item 4p. *Lighting and ventilation*.—All rooms shall be well lighted and ventilated.

Item 5p. *Miscellaneous protection from contamination*.—The various milk-plant operations shall be so located and conducted as to prevent any contamination of the milk or of the cleaned equipment. All means necessary for the elimination of flies shall be used. There shall be separate rooms for (a) the pasteurizing, processing, cooling, and bottling operations, and (b) the washing and bactericidal treatment of containers. Cans of raw milk shall not be unloaded directly into the pasteurizing room. Pasteurized milk or milk products shall not be permitted to come in contact with equipment with which unpasteurized milk or milk products have been in contact, unless such equipment has first been thoroughly cleaned and subjected to bactericidal treatment. Rooms in which milk, milk products, cleaned utensils, or containers are handled or stored shall not open directly into any stable or living quarters. The pasteurization plant shall be used for no other purposes than the processing of milk and milk products and the operations incident thereto, except as may be approved by the health officer.

Item 6p. *Toilet facilities*.—Every milk plant shall be provided with toilet facilities conforming with the ordinances of the city. Toilet rooms shall not open directly into any room in which milk, milk products, equipment, or containers are handled or stored. The doors of all toilet rooms shall be self-closing. Toilet rooms shall be kept in a clean condition, in good repair, and well ventilated. In case privies or earth closets are permitted and used, they shall be separate from the building, and shall be of a sanitary type constructed, and operated in conformity with the requirements of item 10r, grade A raw milk.

Item 7p. *Water supply*.—The water supply shall be easily accessible, adequate, and of a safe, sanitary quality.

Item 8p. *Hand-washing facilities*.—Convenient hand-washing facilities shall be provided, including warm running water, soap, and approved sanitary towels. The use of a common towel is prohibited.

Item 9p. *Sanitary piping*.—All piping used to conduct milk or milk products shall be "sanitary milk piping" of a type which can be easily cleaned with a brush. Pasteurized milk and milk products shall be conducted from one piece of equipment to another only through sanitary milk piping.

Item 10p. *Construction and repair of containers and equipment*.—All multi-use containers and equipment with which milk or milk products come in contact shall be constructed in such manner as to be easily cleaned and shall be kept in good repair. The manufacture, packing, transportation, and handling of single-service containers and container caps and covers shall be conducted in a sanitary manner.

Item 11p. *Disposal of wastes*.—All wastes shall be properly disposed of.

Item 12p. *Cleaning and bactericidal treatment of containers and equipment*.—All milk and milk products containers and equipment, except single-service containers, shall be thoroughly cleaned after each usage. All containers shall be subjected to an approved bactericidal process after each cleaning and all equipment immediately before each usage. When empty and before being returned to a producer by a milk plant each container shall be effectively cleaned and subjected to bactericidal treatment.

Item 13p. *Storage of containers and equipment*.—After bactericidal treatment all bottles, cans, and other multi-use milk or milk products containers and equipment shall be stored in such manner as to be protected from contamination.

Item 14p. *Handling of containers and equipment*.—Between bactericidal treatment and usage, and during usage, containers and equipment shall not be handled or operated in such manner as to permit contamination of the milk.

Item 15p. *Storage of caps, parchment paper, and single-service containers*.—Milk-bottle caps or cap stock, parchment paper for milk cans, and single-service containers shall be pur-

chased and stored only in sanitary tubes and cartons, respectively, and shall be kept therein in a clean dry place.

Item 16p. *Pasteurization*.—Pasteurization shall be performed as described in section 1 (L) of this promulgation.

Item 17p. *Cooling*.—All milk and milk products received for pasteurization shall immediately be cooled in approved equipment to 50° F., or less, and maintained at that temperature until pasteurized, unless they are to be pasteurized within 2 hours after receipt; and all pasteurized milk and milk products shall be immediately cooled in approved equipment to an average temperature of 50° F., or less, as defined in section 1 (S), and maintained thereat until delivery.

Item 18p. *Bottling*.—Bottling of milk and milk products shall be done at the place of pasteurization in approved mechanical equipment.

Item 19p. *Overflow milk*.—Overflow milk or milk products shall not be sold for human consumption.

Item 20p. *Capping*.—Capping of milk and milk products shall be done by approved mechanical equipment. Hand capping is prohibited. The cap or cover shall cover the pouring lip to at least its largest diameter.

Item 21p. *Personnel, health*.—The health officer or a physician authorized by him shall examine and take careful morbidity history of every person connected with a pasteurization plant, or about to be employed, whose work brings him in contact with the production, handling, storage, or transportation of milk, milk products, containers, or equipment. If such examination or history suggests that such person may be a carrier of or infected with the organisms of typhoid or paratyphoid fever or any other communicable diseases likely to be transmitted through milk, he shall secure appropriate specimens of body discharges and cause them to be examined in a laboratory approved by him or by the State health authorities for such examinations, and if the results justify such person shall be barred from such employment.

Such persons shall furnish such information, submit to such physical examinations, and submit such laboratory specimens as the health officer may require for the purpose of determining freedom from infection.

Item 22p. *Personnel, cleanliness*.—All persons coming in contact with milk, milk products, containers, or equipment shall wear clean outer garments and shall keep their hands clean at all times while thus engaged.

Item 23p. *Miscellaneous*.—All vehicles used for the transportation of milk or milk products shall be so constructed and operated as to protect their contents from the sun and from contamination. All vehicles used for the transportation of milk or milk products in their final delivery containers shall be constructed with permanent tops and with permanent or roll-down sides and back, provided that openings of the size necessary to pass the delivery man may be permitted in the sides or back for loading and unloading purposes. All vehicles shall be kept clean, and no substance capable of contaminating milk or milk products shall be transported with milk or milk products in such manner as to permit contamination. All vehicles used for the distribution of milk or milk products shall have the name of the distributor prominently displayed.

The immediate surroundings of the milk plant shall be kept in a neat, clean condition.

Grade B pasteurized milk.—Grade B pasteurized milk is pasteurized milk which violates the bacterial standard for grade A pasteurized milk and/or the provision of lip-cover caps of item 20p and/or the requirement that grade A raw milk be used, but which conforms with all other requirements for grade A pasteurized milk, has been made from raw milk of not less than grade B quality, and has an average bacterial plate count after pasteurization and before delivery not exceeding 50,000 per cubic centimeter, as determined under sections 1 (S) and 6.

Grade C pasteurized milk.—Grade C pasteurized milk is pasteurized milk which violates any of the requirements for grade B pasteurized milk.

Section 8. *Grades of milk and milk products which may be sold*.—Grades of milk and milk products which may be sold in a city may be determined by each city jointly with the local and State health department.

Section 9. *Supplementary grading prescribed and regrading authorized*.—If, at any time between the regular announcements of the grades of milk or milk products, a lower grade shall be

come justified, in accordance with sections 5, 6, and 7 of this ordinance, the health officer shall immediately lower the grade of such milk or milk products, and shall enforce proper labeling and placarding thereof.

Any producer or distributor of milk or milk products the grade of which has been lowered by the health officer, and who is properly labeling his milk and milk products, may at any time make application for the regrading of his product.

Upon receipt of a satisfactory application, in case the lowered grade is the result of an excessive average bacterial plate count, direct microscopic count, reduction time, or cooling temperature, the health officer shall take further samples of the applicant's output, at a rate of not more than two samples per week. The health officer shall regrade the milk or milk products upward when the average of the last four sample results indicates the necessary quality, but not before the lapse of 2 weeks from the date of degrading.

In case the lowered grade of the applicant's product is due to a violation of an item of the specifications prescribed in section 7, other than average bacterial plate count, direct microscopic count, reduction time, or cooling temperature, the said application must be accompanied by a statement signed by the applicant to the effect that the violated item of the specifications has been conformed with. Within 1 week of the receipt of such an application and statement the health officer shall make a reinspection of applicant's establishment, and thereafter as many additional reinspections as he may deem necessary to assure himself that the applicant is again complying with the higher grade requirements, and, in case the findings justify, shall regrade the milk or milk products upward, but not before the lapse of 2 weeks from the date of degrading.

Section 10. *Transferring or dipping milk; delivery containers; handling of more than one grade; delivery of milk at quarantined residences.*—Except as permitted in this section, no milk producer or distributor shall transfer milk or milk products from one container to another on the street, or in any vehicle or store, or in any place except a bottling or milk room especially used for that purpose. The sale of dip milk is hereby prohibited.

All pasteurized milk and milk products shall be placed in

their final delivery containers in the plant in which they are pasteurized, and all raw milk and milk products sold for consumption in the raw state shall be placed in their final delivery containers at the farm at which they are produced. Milk and milk products sold in the distributor's containers in quantities less than 1 gallon shall be delivered in standard milk bottles or in single-service containers. It shall be unlawful for hotels, soda fountains, restaurants, groceries, and similar establishments to sell or serve any milk or milk product except in the original container in which it was received from the distributor or from a bulk container equipped with an approved dispensing device: Provided, that this requirement shall not apply to cream consumed on the premises, which may be served from the original bottle or from a dispenser approved for such service.

It shall be unlawful for any hotel, soda fountain, restaurant, grocery, or similar establishment to sell or serve any milk or milk products which have not been maintained, while in its possession, at a temperature of 50° F., or less.

No milk or milk products shall be permitted to come in contact with equipment with which a lower grade of milk or milk products has been in contact unless such equipment has first been thoroughly cleaned and subjected to bactericidal treatment.

Bottled milk or milk products, if stored in water, shall be so stored that the tops of the bottles will not be submerged.

It shall be the duty of all persons to whom milk or milk products are delivered to clean thoroughly the containers in which such milk or milk products are delivered before returning such containers. Apparatus, containers, equipment, and utensils used in the handling, storage, processing, or transporting of milk or milk products shall not be used for any other purpose without the permission of the health officer.

The delivery of milk or milk products to and the collection of milk or milk products containers from residences in which cases of communicable disease transmissible through milk supplies exist shall be subject to the special requirements of the health officer.

Section 11. *Milk and milk products from points beyond the*

limits of routine inspection.—The sale of milk and milk products from points beyond the limits of routine inspection by a city may be prohibited unless the health officer can satisfy himself that such milk is produced and/or pasteurized under provisions equivalent to those of these specifications and requirements.

Section 12. *Future dairies and milk plants.*—All dairies and milk plants from which milk or milk products are supplied to a city which are hereafter constructed, reconstructed, or extensively altered shall conform in their construction to the requirements and specifications for grade A dairy farms producing milk for consumption in the raw state, or for grade A pasteurization plants, respectively: Provided, that the requirement of a two-room milk house shall be waived in the case of dairies the milk from which is to be pasteurized. Properly prepared plans for all dairies and milk plants which are hereafter constructed, reconstructed, or extensively altered shall be submitted to the health officer for approval before work is begun. In the case of milk plants signed approval shall be obtained from the health officer and/or the State health department.

Section 13. *Notification of diseases.*—Notice shall be sent to the health officer immediately by any producer or distributor of milk or milk products upon whose dairy farm or in whose milk plant any infectious, contagious, or communicable disease occurs.

Section 14. *Procedure when infection suspected.*—When suspicion arises as to the possibility of transmission of infection from any person concerned with the handling of milk or milk products, the health officer is authorized to require any or all of the following measures: (1) The immediate exclusion of that person from milk handling, (2) the immediate exclusion of the milk supply concerned from distribution and use, (3) adequate medical and bacteriological examination of the person, of his associates, and of his and their body discharges.

Section 15. *Enforcement interpretations.*—The above specifications and regulations shall be interpreted, applied, and enforced in accordance with the interpretations contained and set forth in the 1939 Edition of the United States Public Health Service Milk Ordinance and Code. When these minimum specifications and regulations have been adopted locally by city or

county ordinance or other governing body, they shall be interpreted, applied, and enforced by the local health officer or other governing body in accordance with the above, and a copy shall be on file with the county, city or other governing body.

Section 16. *Assistance to local authorities.*—The director of the Georgia Department of Public Health shall provide technical personnel meeting requirements of the state merit system to render technical and advisory service to all local, county, and municipal health departments, and other public officials, and shall promote the local adoption of a milk sanitation ordinance, and shall provide, so far as may be necessary, facilities for bacteriological, chemical, and physical tests and performance of such inspections and tests as may be necessary for compliance with state and local regulations and ordinances.

Section 17. *Penalties.*—Failure to comply with the provisions of any section or sub-section of these rules and regulations shall constitute a violation thereof and shall be punishable as provided for in Section 88-99 and 88-112 of the Georgia Code of 1933.

Adopted by the State Board of Health on November 1, 1944.

Regulations Concerning the Reporting of Occupational Diseases and Investigations Covering Them

It shall be the duty of each physician having knowledge of any person whom he believes to be suffering from any occupational disease to report the same to the board of health in the same manner as he reports other notifiable diseases to the board of health.

Occupational diseases may be defined for the purpose of this regulation as any disease contracted as a result of the nature of the employment. Bulletin No. 41 of the U. S. Department of Labor, entitled "Occupational Hazards and Diagnostic Signs," is adopted as a guide to impairments to be looked for in hazardous occupations. A copy of this bulletin shall be made available to all physicians to serve as a guide in reporting.

All reports made pursuant to the provisions of this regulation shall be confidential records of the board of health and shall not be open for public inspection. The State Department of

Public Health is authorized to investigate and to make recommendations for the elimination or prevention of occupational diseases which have been reported to it or which shall be reported to it in accordance with the provisions of this regulation. Said Department is also authorized to study and make recommendations in regard to conditions that may be suspected of causing occupational diseases. Information obtained and opinions based upon these investigations shall be confidential records of the board of health and shall not be open for public inspection.

Adopted by the State Board of Health on October 16, 1941.

Rules and Regulations Prohibiting the Importation, Purchase, Breeding, Giving Away, Sale or Offer of Sale of Birds of the Psittacine Family

The importation, purchase, breeding, giving away, sale or offer of sale of birds of the psittacine family is hereby prohibited; provided, however, that the importation and breeding of such birds for scientific research or exhibiting in public zoological gardens may be permitted subject to the approval of the State Health Officer. For the purposes of this regulation birds of the psittacine family shall mean and include any parrot, parakeet, love bird, macaw, cockatoo, lory, lorikeet, or any other bird of the parrot or psittacine family not specifically enumerated herein. This regulation shall become effective not less than three months after the date of its adoption.

Adopted by the State Board of Health on April 16, 1942.

Inoculation for Rabies.

GEORGIA LAWS 1945.

Hydrophobia, prevention of; Georgia Code 1933, 88-116, see page 8 of this bulletin.

Section 1. *Terms Defined.* Whenever used in this Act, unless a contrary intention is clearly evident, the following terms shall be interpreted as herein defined: (a) The term "dog"

shall mean and include all members of the canine family, three months or more of age and also pet foxes, wolves, etc. (b) The term "owner" shall mean and include any person having a right of property in the dog, or who keeps or harbors a dog, or who has it in its care, or acts as its custodian, or who permits a dog to remain on or about any premises occupied by him. (c) The term "inoculation against rabies" shall mean the injection, subcutaneously or otherwise as approved by the Georgia Department of Public Health of canine antirabic vaccine, approved by the Georgia Department of Public Health.

Section 2. *Enforcement Provision.* For the purpose of providing proper enforcement of the provisions of this Act, each County Board of Health is hereby invested with general supervisory powers, and it shall be its duty to appoint, within 90 days after passage of this Act, and annually thereafter within the first 15 days of January, a licensed veterinarian or other properly qualified person who shall be known as Rabies Inspector. Such inspector may select as many deputy inspectors to aid him as may be necessary. It shall be the duty of the said inspector, under the direction of the County Board of Health, to enforce the provisions of this Act, and to inoculate dogs or have the work done by his deputies; and, for the purpose of enforcing this Act, the said Rabies Inspector and his deputies are clothed with full police power; and the sheriff and his deputies and the police officers in each incorporated municipality shall be aides and are instructed to cooperate with said Inspector in carrying out the provisions of this Act. The compensation of the Inspector and his deputies shall be limited to the fees prescribed in succeeding sections of this Act. The said Rabies Inspector may be removed from office, for cause, by the County Board of Health.

Section 3. *Inoculation of Dogs Required.* Prior to July 1 of each year, every owner of a dog, not confined at all times to an enclosed area, or on leash, or muzzled, shall cause such dog to be inoculated against rabies by the Rabies Inspector, or by his deputy, or by a competent veterinarian. Evidence of such inoculation shall consist of a certificate signed by the person administering the vaccine. The certificate shall be prepared and furnished free of charge to the Rabies Inspectors by the State Department of Public Health and shall contain such pertinent data as may be prescribed by the State Department

of Public Health. One copy of the certificate shall be given to the owner, one filed with the County Board of Health, and one retained by the Inspector as a permanent record. The type and brand of manufacture of the rabies vaccine used must be approved by the State Board of Health and may be secured from the State Department of Public Health at prevailing cost price.

Section 4. *Dogs to Wear Tags.* Coincident with the issuance of the certificate of inoculation, as prescribed in the preceding section, the Rabies Inspector or other person authorized to furnish the certificate shall also furnish a serially numbered tag bearing the same number and year as the certificate bears, which tag shall at all times be attached to a collar or harness worn by the dog for which the certificate and tag have been issued. Tags shall be furnished by the Georgia Department of Public Health to the county rabies inspectors without cost.

Section 5. *Inoculation Fee.* It is hereby provided that the Rabies Inspector, or other person authorized to inoculate dogs against rabies, may charge for such services a sum not to exceed \$1.00, including the cost of the vaccine.

Section 6. *Penalties.* On and after July 1, 1945, any dog as defined in Section 1 of this Act found running at large and not wearing the evidence of inoculation as provided herein, and for which no certificate of inoculation can be produced, and which is apprehended by any officer or other person charged with the enforcement of this Act, shall forthwith be subject to a penalty of fifty cents (50c), to be imposed by the Rabies Inspector on the owner of the dog, in addition to the fee heretofore prescribed for inoculation. The said penalty, when collected, shall accrue to the person making the apprehension.

Section 7. *Impounding of Unlicensed Dogs.* It shall be the duty of each and every county in the State, and of every municipality over 5,000 in which the county pound is not located, to provide a suitable enclosure for the impounding of all dogs found running at large in violation of the provisions of this Act. Where dogs are impounded, the Rabies Inspector shall, in some form or manner, give a notice of not less than seven (7) days; and, if the owner thereof is known, such owner shall be given direct notice of the impounding of a dog or dogs belonging to him. If the owner is unknown the Rabies Inspector shall run a notice in the official organ for two weeks, giving a

full description of the dog, and if the owner redeems said dog he shall pay the cost of advertisement.

Section 8. *Disposition of Dogs Prescribed.* All dogs which have been impounded for failure to be inoculated in accordance with the provisions of this Act, due notice of which impounding shall have been given as provided in the preceding section, shall be humanely dispatched and disposed of when not redeemed by the owner within seven (7) days. Where there exists a humane society in any city of the State where the provisions of this Act are applicable, said humane society shall have the privilege of dispatching all unredeemed dogs, should it so elect. In case the owner of any impounded dog desires to make redemption thereof, he may do so on the following conditions: He must pay for the inoculation of the dog, for the board of the dog for the period for which it was impounded, and fifty cents (50c) in addition as a penalty, as prescribed in Section 6. The Rabies Inspector may, at his discretion, sell any dog, not redeemed or claimed or otherwise disposed of, to any purchaser desiring the said dog, but said purchaser must comply with all the provisions of this Act.

Section 9. *Confinement of Bitten or Suspected Rabid Dogs Prescribed.* The owner of any dog, whether vaccinated or not, which has been bitten by another animal, or which exhibits symptoms of rabies, shall immediately notify the County Health Office or Rabies Inspector, and shall promptly confine such dog, or have it confined, under suitable observation, for a period of at least sixty days, unless officially authorized by the County Health Office or Rabies Inspector, in writing, to release it sooner.

Section 10. *Confinement of Dogs Which Have Bitten Human Beings Authorized.* Whenever the County Health Office or Rabies Inspector shall receive information that any person has been bitten by a dog, the said County Health Office or Rabies Inspector shall be required to have the said dog confined for a period of seven (7) days. And it shall be unlawful for any person having knowledge that any person has been bitten by a dog to refuse to notify promptly one or more of the officers mentioned in this section. It shall be unlawful for the owner of such dog to refuse or fail to comply with the written recommendations made by the County Health Office or Rabies Inspector, in any particular case, and any expense incurred in the hau-

dling of any dog, under this and the preceding section, shall be borne by the owner.

Section 11. *General Provisions.* Any person violating or aiding in or abetting the violation of any provision of this Act, or counterfeiting or forging any certificate, permit, or tag, or making any misrepresentation in regard to any matter prescribed by this Act; or resisting, obstructing, or impeding any authorized officer in enforcing this Act; or refusing to produce for inoculation, any dog in his possession, not confined at all times to an enclosed area, or on leash, or muzzled, shall be guilty of a misdemeanor and, upon conviction, shall be fined not less than one nor more than ten dollars, and, for the purpose of enforcing this section, any court of competent jurisdiction shall have jurisdiction in such offenses.

Section 12. *Severability.*

Section 13. Nothing in this Act shall be held to limit in any manner the power of any municipality to prohibit dogs from running at large, whether or not they have been inoculated as herein provided; nor shall anything in this Act be construed to, in any manner, limit the power of any municipality to further control and regulate dogs in such municipality.

Section 14. The County Health Office or the Rabies Inspector or deputy officers or any one enforcing the provisions of this Act shall not be held responsible for any accident or disease that may happen to any dog.

Section 15. The Board of Health of each county is hereby required to make annual report to the State Department of Public Health showing the number of dogs inoculated, fees and penalties collected, and the number of cases of rabies occurring in the respective county. (Acts 1945, pp. 448-453.)

Rules and Regulations for the Control of Rabies

Rule I. *Quarantine of dogs when Rabies is known to exist:* In the event rabies is known to exist in a given locality, it should be the duty of the local board of health in whose jurisdiction the disease exists to order all dogs quarantined or con-

fined for a period of not less than 60 days from date of last occurrence. All dogs found on public highways, or streets, or anywhere off the premises of the owner except on leash, shall be impounded. Dogs thus impounded, if not reclaimed by the owner within five days shall be humanely dispatched or otherwise disposed of at the discretion of the health officer. The zone or area of such quarantine shall extend for a radius of not less than one mile from the focus of infection.

Public notice of such quarantine shall be by publication in local newspapers or by posting of notice in public places, or by both.

Such quarantine shall apply to all dogs and does not exempt dogs having been "inoculated" or "vaccinated" with antirabic canine vaccine.

Rule II. *Seven days quarantine of biting animals:* Any dog, cat, or other animal known or suspected to have bitten any person or persons shall be ordered confined on the premises of the owner or harbinger of the animal for a period of not less than seven days from date of biting. Under no circumstances should the animal be killed during this time. If normal after seven days the animal may be released or otherwise disposed of as the occasion may demand. No exemption for "inoculated" dogs. In the event no owner or harbinger of such animal can be found, said animal shall be captured and impounded for a period of not less than seven days, after which time the animal may be humanely destroyed.

Rule III. *Sixty days quarantine of dogs bitten by rabid dogs:* Any dog, cat, or other animal known or suspected to have been bitten by a dog or cat known or suspected to be rabid may be killed or securely confined without recess for a period of sixty days. If rabies has not developed in such animal by the end of sixty days, it may be ordered released from quarantine. No exemption for "inoculated" dogs.

Adopted by State Board of Health on March 22, 1939.

Rule and Regulation Prohibiting the Sale of Certain Types of Rat Poison

Under authority given the State Board of Health in Sections 88-112 and 88-117 of the Georgia Code of 1933 the following rule and regulation is hereby adopted to protect the lives and health of human beings as follows:

On and after this date the sale or distribution or offering for sale or distribution within the State of Georgia of any preparation containing live organisms that are recognized to be pathogenic or dangerous to the health of human beings is prohibited for the purpose of exterminating rats or other rodents or animals or for purposes other than use in scientific research as approved by the Director, Georgia Department of Public Health.

Adopted by the State Board of Health on January 11, 1945.

Rules and Regulations Forbidding Search of Records

WHEREAS, demands have been made upon the staff and employees of the State Board of Health by various persons to be allowed to inspect the records of the Board, and

WHEREAS, the indiscriminate allowing of such search is not conducive to keeping such files in an orderly and clean manner, and

WHEREAS, many of the files of the Board, notably birth and death certificates, must be kept as permanent records and it is incumbent upon such employees who have them in charge to maintain them in a clean and orderly condition, and

WHEREAS, other files of the Board, notably laboratory findings and diagnoses, by their very nature, are confidential and personal to the person on whom reports are made and their physicians, therefore

BE IT RESOLVED, that the files of the State Board of Health of Georgia are not open to public inspection, and the Director of the Department of Public Health and employees are instructed not to permit public inspection of any record

which would violate the confidential relation between physician and patient;

BE IT FURTHER RESOLVED, that public search of records of birth and death is prohibited, and only authorized employees of the Department of Public Health will search the files of the State Bureau of Vital Statistics for any applicant for certified copies of birth and death certificates only upon payment of the statutory fee by the applicant for such certificates, as provided in Section 88-1212 of the Code of 1933;

BE IT FURTHER RESOLVED, that the foregoing paragraph shall apply to local registrars of vital statistics, who shall not permit any search of their records of birth and death certificates by any person except themselves or a person authorized in writing by the Director of the State Department of Public Health.

Adopted by the State Board of Health on March 20, 1935.

Restaurants, Cafes, Trailer-Parks Regulated.

GEORGIA LAWS 1945.

Section 1. That the Act approved March 29, 1937 (Ga. L. 1937, p. 624) entitled "An Act to provide that no person, firm, or corporation shall establish, maintain, or operate any public dance-hall, etc., for money or profit outside the limits of incorporated towns or cities in any county in this State having a population of 3,000 or more, according to the last or any future Federal census, without first obtaining the permission of the commissioners of roads and revenues, etc.," be and the same is hereby amended by adding after the words "barbecue stands" in the 6th line of Section 1 of said Act the words "restaurant, cafe, trailer-park or other public eating house (boarding houses excluded), public taxi-cabs," so that said section when so amended, shall read as follows:

Section 1. Be it enacted by the General Assembly of Georgia and it is hereby enacted by authority of the same, That from and after the passage of this Act, no person, firm or corporation shall establish, maintain, or operate any public dance-hall, boxing or wrestling arena amusement place, tourist-camps and barbecue stands, restaurant, cafe, trailer-park or other

public eating house (boarding houses excluded), public taxicabs, for money or profit outside the limits of incorporated towns or cities in any county in this State having a population of 3,000 or more, according to the last or any future Federal census, without first obtaining the permission of the commissioners of roads and revenues or other authority in charge of such counties.

Section 2. Such commissioners of roads and revenues or other authority in charge of said counties shall have authority to grant or refuse such permission, or to grant the same for such time and under such regulations as they may deem proper for the public good. Such commissioner of roads and revenue or other authority in charge of said counties shall have authority to levy a license or occupational tax on such persons, firms or corporations included within the provisions of this Act.

Section 3. Any person, firm or corporation establishing, maintaining or operating any such establishment as herein set forth without securing said permission, shall be guilty of a misdemeanor and such establishment shall be subject to be abated as a nuisance. (Acts 1945, pp. 482-483.)

Road Houses, Tourist Camps, Etc., Regulated.

GEORGIA LAWS 1945.

Section 1. Every person, firm or corporation engaged in the business of operating outside the corporate limits of any city or town in this State a tourist camp, cabin camp, tourist home, road house, public dance hall, or any other similar establishment by whatever name called, where travelers, transient guest, or other persons are or may be lodged, or operating restaurants, cafes, or places where food and/or drinks are sold to be consumed at said places, shall, before engaging in such business, apply for and obtain from the County Commissioners or the Board of Commissioners of Roads and Revenues or from the Ordinary Sitting for County Purposes (referred to hereafter in this act as County Commissioners) in the county in which such business is to be carried on a license for the privilege of engaging in such business.

Section 2. This Act shall not apply to hotels and inns within the definition of Sections 52-101 and 52-102 of the 1933 Civil Code of Georgia nor to persons who incidental to their principal business or occupation accept from time to time seasonal boarders in their private residences.

Section 3. Every person, firm or corporation making application for license to engage in the business described in Section one of this Act shall make application to the County Commissioners in the county in which such business is to be engaged in and the application shall contain:

- (a) The name and residence of the applicant and the length of the residence within the State of Georgia.
- (b) The address and place for which such license is desired.
- (c) The name of the owner of the premises upon which the business licensed is to be carried on.
- (d) That the applicant intends to carry on the business authorized by the license for himself or under his immediate supervision and direction.
- (e) That such applicant is of good moral character and has never been convicted of felony involving moral turpitude, or adjudged guilty of violating either the State or Federal prohibition laws within the last two years prior to the filing of the application.

Section 4. The application prescribed in Section three of this Act must be verified by the affidavit of the petitioner made before a notary public or other person duly authorized by law to administer oaths. If it appears from the statement of the applicant, or otherwise, that such applicant has been convicted of a felony involving moral turpitude, or adjudged guilty of violating either State or Federal prohibition laws within the last two years prior to the filing of the application, or within two years from the completion of sentence thereon, the license herein provided for shall not be granted, unless it shall appear to the satisfaction of the County Commissioners that the licensed premises will be operated in a lawful manner; in which case they may, in their discretion, issue such license. Before any such license shall be issued, the governing body of the county shall be satisfied that the statements required by Section three are true. Every establishment named in this Act shall be subject to inspection by the State Board of Health and the

county health authorities in the county in which such business is carried on.

Section 5. At any time upon request of the Sheriff of the county in which such business is carried on, the operator of every establishment named in this Act shall furnish said Sheriff with a list of all employees who are employed by him in connection with said business; and, in every instance when such an operator goes out of business or there is a change of ownership or management thereof, such operator shall immediately file with the clerk of the County Commissioners of the county in which such business is carried on a notice to this effect, giving the name and address of the purchaser or the new owner or manager thereof.

Section 6. Any person or persons occupying any room or rooms in a tourist camp, cabin camp, tourist home, road house, or any other similar establishment by whatever name called, shall register or cause himself to be registered before occupying the same, and if traveling by motor vehicle shall register at the same time the automobile license tag of such motor vehicle and the manufacturer's name of such motor vehicle, and no person shall write or cause to be written or, if in charge of a register, knowingly permit to be written in any register in any of the establishments herein named by other or a different name or designation than the true name or names in ordinary use of the person registering or causing himself to be registered therein, or the true name of the manufacture of such motor vehicle or the correct license plate and number thereof. Every person to whom a license is issued under the provisions of this Act shall provide a permanent register for the purposes set forth **herein**.

Section 7. Any man or woman found occupying the same room in any establishment within the meaning of this Act for any immoral purpose, or any man or woman falsely registering as or otherwise representing themselves to be husband and wife in any such establishment shall, upon conviction thereof, be guilty of a misdemeanor and shall be fined or imprisoned in the discretion of the court.

Section 8. Any person being the operator or keeper of any establishment within the meaning of this Act who shall knowingly permit any man or woman to occupy any room in any

establishment within the meaning of this Act for any immoral purposes, or who shall knowingly permit any man or woman to falsely register as husband and wife in such an establishment, shall, upon conviction thereof, be guilty of a misdemeanor and shall be fined or imprisoned in the discretion of the court.

Section 9. Any person who shall knowingly persuade, induce or entice, or cause to be persuaded, induced or enticed, any woman or girl to enter any establishment within the meaning of this Act for the purpose of prostitution or debauchery, or for any other immoral purpose, shall be deemed guilty of a misdemeanor and upon conviction thereof shall be fined or imprisoned in the discretion of the court.

Section 10. In addition to the penalty herein prescribed for a violation of this Act, the court, before whom such person is tried and where a conviction is had, shall have the power to revoke the license to operate the establishments licensed under this Act, and whenever any person, firm or corporation has been so convicted, the court, if it shall appear that said premises were being operated in violation of the law with the knowledge, consent or approval of the owner thereof, shall have the authority to prohibit the issuance of any similar license for said premises to any person for a term of one year after the revocation of said license.

Section 11. The tax imposed by this Act shall be in addition to all other licenses and taxes levied by law upon the business taxed hereunder.

Section 12. Licenses issued under this Act shall be due in advance annually on or before the first day of June of each year, or at the date of engaging such business, and shall expire on the thirty-first day of May of each year, and shall be for the full amount of the tax prescribed, regardless of the date such business is begun. Upon the expiration of the license herein required, it shall be unlawful for any person, firm or corporation to continue such business until a new license is applied for and obtained for the privilege of engaging in such business, as in this Act required.

Section 13. It shall be unlawful for any person, firm or corporation to engage in such business without first obtaining a license therefor. Any person violating the provisions of this

section shall be guilty of a misdemeanor and upon conviction thereof shall be fined or imprisoned in the discretion of the court.

Section 14. Unless another penalty is in this Act or by the laws of this State provided, any person violating any of the provisions of this Act shall, upon conviction thereof, be guilty of a misdemeanor and shall be fined or imprisoned in the discretion of the court.

Section 15. The governing body of any city or town shall have the authority to make any or all of the provisions of this Act applicable to any business as defined herein which may be located in the limits of any such city or town.

Section 16. The provisions of this Act shall be supplemental to and not in derogation of any of the provisions of the General, Civil, and Penal Laws now in force relating to the licensing and regulating of tourist camps, dance halls, road houses and similar businesses.

Section 17. Severability.

Section 17-A. Upon application of any officer or citizen of the county wherein such establishment is located, the Superior Courts of the State of Georgia are hereby authorized to enjoin any licensee hereunder from further operating such business upon proof that such licensee has violated the provisions of this Act, or upon proof that the licensee has forfeited his license; and said Superior Courts, and the Judges thereof, shall likewise have authority to and shall enjoin, at the instance of any taxpayer or citizen, any person, firm, or corporation from further operating such business without first securing the license herein provided for.

Section 18. This Act shall be in full force and effect from and after June 1, 1945. (Acts 1945, pp. 326-331.)

Rules and Regulations Adopted by the Georgia State Board of Health for Restaurant Sanitation

This twenty-seventh day of September, 1940, under authority of Sections 88-107, 88-112 and 88-117 of the Georgia Code of 1933, the Georgia State Board of Health, in addition to the en-

acted laws, hereby adopts the following rules and regulations for the prevention of the spread of contagious and infectious diseases:

Rule I. *Designated Areas*.—These rules and regulations shall be effective in all areas in Georgia, urban and rural, and may provide for inspection, grading, or non-grading, regrading, and placarding of eating and drinking establishments, the issuing, suspension and revocation of permits for the operation of such establishments, and prohibiting the sale of adulterated, misbranded, or unwholesome food and drink.

Rule II. *Definitions*.—The following definitions shall apply in the interpretation and the enforcement of these rules and regulations:

- a. *Restaurant*.—The term “restaurant” shall mean restaurant, coffee shop, cafeteria, short order cafe, luncheonette, tavern, sandwich stand, soda fountain, and all other public eating and drinking establishments, as well as kitchens in which food and drink are prepared for sale elsewhere to the public.
- b. *Itinerant restaurant*.—The term “itinerant restaurant” shall mean one operating for a temporary period in connection with a fair, carnival, circus, public exhibition, or other similar gathering.
- c. *Employee*.—The term “employee” shall mean any person who handles food or drink during preparation or serving, or who comes in contact with any eating or cooking utensils, or who is employed at any time in a room in which food or drink is prepared or served.
- d. *Utensils*.—“Utensils” shall include any kitchenware, tableware, glassware, cutlery, utensils, containers, or other equipment with which food or drink comes in contact during storage, preparation, or serving.
- e. *Director*.—The term “director” shall mean the Director of the Georgia Department of Public Health or his authorized representative.
- f. *Person*.—The word “person” shall mean person, firm, corporation, or association.

Rule III. *Permits*.—It shall be unlawful for any person to operate a restaurant within limits prescribed by these rules

who does not possess an unrevoked permit from said director, and in whose place of business such permit is not posted in a conspicuous place. Only persons who comply with the requirements of these rules and regulations or rules, regulations, or ordinance adopted by local authorities, shall be entitled to receive and retain a permit.

Such a permit may be suspended by the director, or revoked after an opportunity for a hearing by the director, upon the violation by the holder of any of the terms of these rules and regulations, or by terms of a local ordinance as stated above.

Such a permit may be suspended by the director, or revoked after an opportunity for a hearing by the director, upon violation by the holder of any of the terms of these rules and regulations.

Rule IV. *Placarding or public display of permit.*—Every restaurant shall display at all times in a place designated by the director or his authorized representative, a copy of the permit.

Rule V. *Examination and condemnation of unwholesome or adulterated food or drink.*—Samples of food and drink may be taken and examined by the director as often as he deems necessary for the detection of unwholesomeness or adulteration. The director may condemn and forbid the sale of, or cause to be removed or destroyed, any food or drink which he deems unwholesome or adulterated.

Rule VI. *Inspection of restaurants.*—Every restaurant located within any area prescribed in accordance with Rule I shall be inspected as often as the said director shall direct. In case the director or his authorized representative discovers or has reason to suspect violation of any item of sanitation required, he may immediately suspend or revoke the permit.

One copy of the inspection report shall be posted by the director or his authorized representative upon an inside wall of the restaurant, and said inspection report shall not be defaced or removed by any person except the director or his authorized representative. Another copy of the inspection report shall be filed with the records of the health department.

Rule VII. *Sanitation requirements for restaurants.*—All restaurants shall comply with all of the following items of sanitation:

- Item 1. *Floors*.—The floors of all rooms in which food or drink is stored, prepared, or served, or in which utensils are washed, shall be of such construction as to be easily cleaned, shall be smooth, and shall be kept clean and in good repair.
- Item 2. *Walls and ceilings*.—Walls and ceilings of all rooms shall be kept clean and in good repair. All walls and ceilings of rooms in which food or drink is stored or prepared shall be finished in light color. The walls of all rooms in which food or drink is prepared or utensils are washed shall have a smooth, washable surface up to the level reached by splash or spray.
- Item 3. *Doors and windows*.—All openings into the outer air shall be effectively screened and doors shall be self-closing, unless other effective means are provided to prevent the entrance of flies.
- Item 4. *Lighting*.—All rooms in which food or drink is stored or prepared or in which utensils are washed shall be well lighted.
- Item 5. *Ventilation*.—All rooms in which food or drink is stored, prepared, or served, or in which utensils are washed, shall be well ventilated.
- Item 6. *Toilet facilities*.—Every restaurant shall be provided with adequate and conveniently located toilet facilities for its employees, which are approved by the Georgia Department of Public Health. In restaurants hereafter constructed toilet rooms shall not open directly into any room in which food, drink, or utensils are handled or stored. The doors of all toilet rooms shall be self-closing. Toilet rooms shall be kept in a clean condition, in good repair, and well lighted and ventilated. Handwashing signs shall be posted in each toilet room used by employees. In case privies or earth closets are permitted and used, they shall be separate from the restaurant building, and shall be of a sanitary type constructed and operated in conformity with the standards of the State Board of Health.
- Item 7. *Water supply*.—The water supply shall be easily accessible to all rooms in which food is prepared or

utensils are washed, and shall be adequate, and of a safe sanitary quality.

Item 8. *Lavatory facilities.*—Adequate and convenient hand-washing facilities shall be provided, including warm water, soap, and approved sanitary towels. The use of a common towel is prohibited. No employee shall resume work after using the toilet room without first washing his hands.

Item 9. *Construction of utensils and equipment.*—All multi-use utensils and all show and display cases or windows, counters, shelves, tables, refrigerating equipment, sinks, and other equipment or utensils used in connection with the operation of a restaurant shall be so constructed as to be easily cleaned and shall be kept in good repair.

Item 10. *Cleaning and bactericidal treatment of utensils and equipment.*—All equipment, including display cases or windows, counters, shelves, tables, refrigerators, stoves, hoods, and sinks, shall be kept clean and free from dust, dirt, insects, and other contaminating material. All cloths used by waiters, chefs, and other employees shall be clean. Single-service containers shall be used only once.

All multi-use eating and drinking utensils shall be thoroughly cleaned and effectively subjected to an approved bactericidal process after each usage. All multi-use utensils used in the preparation or serving of food and drink shall be thoroughly cleaned and effectively subjected to an approved bactericidal process immediately following the day's operation. Drying cloths, if used, shall be clean and shall be used for no other purpose.

Item 11. *Storage and handling of utensils and equipment.*—After bactericidal treatment no utensils shall be stored except in a clean dry place protected from flies, dust, or other contamination, and no utensils shall be handled except in such manner as to prevent contamination as far as practicable. Single-service utensils shall be purchased only in sanitary containers, shall be stored therein in a clean dry place until used, and shall be handled in a sanitary manner.

- Item 12. *Disposal of waste and elimination of rats.*—All garbage waste, tin cans, and other offal shall be stored in galvanized garbage cans with tight fitting lids until properly disposed of in a sanitary manner.

The building in which the establishment is housed shall be made rat proof insofar as possible in order to prevent typhus fever and to eliminate rat harborage.

Storage—Shelving and fixtures.—All shelving and fixtures shall be devoid of any enclosed space at the base by removing side boards so as to allow free access or enclosing base of shelving or fixture with metal to prevent ingress and egress of rats. All wooden gratings or storage racks shall be constructed of open slats and height of slats above floor shall not be less than eight inches. Underneath surface of the racks shall be open and exposed to normal vision at all times.

- Item 13. *Refrigeration.*—All readily perishable food or drink shall be kept at or below 50° F., except when being prepared or served. Waste water from refrigeration equipment shall be properly disposed of.

- Item 14. *Wholesomeness of food and drink.*—All food and drink shall be wholesome and free from spoilage. All milk, fluid milk products, ice cream, and other frozen desserts served shall be from sources approved by the director or his authorized representative. Milk and fluid milk products shall be served in the original containers in which they were received from the distributor or from a bulk container equipped with an approved dispensing device: Provided, That this requirement shall not apply to cream, which may be served from the original bottle or from a dispenser approved for such service. All oysters, clams, and mussels shall be from approved sources.

- Item 15. *Storage and display of food and drink.*—All food and drink shall be so stored and displayed as to be protected from dust, flies, vermin, unnecessary handling, droplet infection, overhead leakage, and other contamination. No animals or fowls shall be kept

or allowed in any room in which food or drink is prepared or stored. All means necessary for the elimination of flies shall be used.

Item 16. *Cleanliness of employees.*—All employees shall wear clean outer garments and shall keep their hands clean at all times while engaged in handling food, drink, utensils, or equipment.

Item 17. *Miscellaneous.*—The premises of all restaurants shall be kept clean and free of litter or rubbish. None of the operations connected with a restaurant shall be conducted in any room used as living or sleeping quarters. Adequate lockers or dressing rooms shall be provided for employees' clothing and shall be kept clean. Soiled linens, coats, and aprons shall be kept in containers provided for this purpose.

Itinerant restaurants.—Itinerant restaurants shall be constructed and operated in a manner approved by the director.

Rule VIII. *Restaurants which may operate.*—From and after one month from the date hereof no restaurants shall be operated within the area designated unless it conforms with the requirements of these rules and regulations: Provided, That when any restaurant fails to qualify, the director is authorized to revoke the permit.

Rule IX. *Reinstatement of permit.*—Any restaurant the permit of which has been suspended may at any time make application for the reinstatement of the permit.

Within one week after the receipt of a satisfactory application, accompanied by a statement signed by the applicant to the effect that the violated item or items of the specifications have been conformed with, the director or his authorized representative shall make a reinspection, and thereafter as many additional reinspections as he may deem necessary to assure himself, that the applicant is again complying with the requirements, and, in case the findings indicate compliance, shall reinstate the permit.

Rule X. *Poisonous substances.*—No article, polish, or other substance containing any cyanide preparation or other poison-

ous material shall be used for the cleansing or polishing of utensils.

Rule XI. *Health of employees.*—No person, firm or corporation shall employ any person for service as cook, waiter, waitress, hostess, or for any other service in or around such restaurant, nor shall he allow any person to render these services gratuitously, until he has secured a statement from a reputable doctor of medicine, stating that such person is free from all infectious, contagious or communicable diseases, or symptoms of such diseases, including any of the venereal diseases, unless in the opinion of the physician such person is known to be incapable of transmitting such disease by reason of regular and continuous treatments which render him non-infectious. In cases where the person is employed under the provisions of these continuous treatments, the employer shall require a monthly statement from some reputable doctor of medicine or approved clinic that such person is taking the necessary treatments regularly. Such statement or certificate from the doctor of medicine or approved clinic shall be kept on file and available for inspection by the director or his authorized representative at all times, but in no case shall the individual employee be permitted to have any copy of such certificate or any statement that such certificate has been issued.

Notice shall be sent to the director or his authorized representative immediately by the restaurant manager or by the employee concerned if he or any employee contracts any infectious, contagious, or communicable disease, or has a fever, a skin eruption, a cough lasting more than 3 weeks, or any other suspicious symptom. It shall be the duty of any such employee to notify the restaurant manager immediately when any of said conditions obtain, and if neither the manager nor the employee concerned notifies the director immediately when any of said conditions obtain they shall be held jointly and severally to have violated this rule. A placard containing this rule shall be posted in all toilet rooms.

Rule XII. *Procedure when infection suspected.*—When suspicion arises as to the possibility of transmission of infection from any restaurant employee the director or his authorized representative is authorized to require any or all of the following measures: (1) the immediate exclusion of the employee

from all restaurants; (2) the immediate closing of the restaurant concerned until no further danger of disease outbreak exists, in the opinion of the director; (3) adequate medical examinations of the employee and of his associates, with such laboratory examinations as may be indicated.

Rule XIII. *Enforcement interpretation.*—For the purpose of enforcing these rules and regulations the Director of the Georgia Department of Public Health may call in the aid of the sheriff and constables of any county, the police and other enforcement officers of any town or city, who shall in such cases render him all needed assistance.

Rule XIV. *Penalties.*—Any person who violates any provision of these rules and regulations shall be punished as prescribed in several sections, Chapter 88-99, Georgia Code of 1933.

Adopted by the State Board of Health on September 27, 1940, and October 21, 1943, and amended October 17, 1947.

Rules and Regulations for the Sanitary Control of Tourist Camps

Section 1. For the purpose of these provisions the following terms are defined.

“The Board” shall mean the State Board of Health. “The Director” shall mean the Director of the Georgia Department of Public Health appointed by the Board. “Health authority” shall mean the director or his authorized representative.

“Tourist camp” shall mean a tourist camp, tourist court, trailer camp, tourist cottages, or any other colloquial or commercial term used and shall be construed to mean and include any site, lot, field or tract of land, privately or publicly owned or operated, upon which two or more cabins, camp cottages, house trailers or similar portable or permanent structures, are used for living, sleeping, eating, recreation, or other purposes and are or intended to be located, such establishments being open and operated and designated to the public as places where temporary residential accommodations are available, whether operated for or without compensation.

Section 2. After adoption of these regulations by the Board,

the Director or his authorized representative shall inspect, regulate, and be responsible for sanitary control of all tourist camps in the State of Georgia for the public convenience and for protection of the public health.

Section 3. No new camp shall be established until the proposed location has been examined and the location, plans and specifications have been approved by the Director or authorized representative. All existing camps shall comply with these regulations by April 1, 1947.

Section 4. Upon approval of a new camp a permit shall be issued authorizing the camp development. A new camp shall not begin operations until all of the following regulations have been complied with and a permit issued by the Director or his representative.

Section 5. Following compliance under Section 4 and at the discretion of the Director or his representative a permit shall be issued if such applicant holds a license from a county issuing such licenses. Such permit may be revoked at any time because of failure after written notice to make required improvements.

Section 6. All permits, revocations, local licenses and notices of violations, shall be on file with the Director and the health authority having local health and sanitation jurisdiction.

Section 7. All camps shall be kept in a clean and sanitary condition at all times, and the Director or his authorized representative may close any camp, whether under permit or not, when not maintained in a satisfactory sanitary condition, and such camp shall not be reopened or operated until sanitary conditions are made satisfactory.

Section 8. The camp shall be well located, well drained and maintained, free from rats, mice, mosquitoes, flies, fleas, vermin, or other insects. It shall not become a public nuisance or a menace to the public health.

Section 9. An adequate supply of potable water shall be provided. Water from a safe and satisfactory public supply shall be provided if available. If a separate supply is provided, the source of same and plans for construction must be approved and the supply be at all times subject to inspection and approval. Water under pressure will be required, together with

satisfactory plumbing for washing and for flush toilets. Any diversion from this requirement must be permitted only by written consent by the health authority.

Section 10. A safe and sanitary method of sewage disposal shall be provided. Connection shall be made to a public sewer if available, or other means approved by the health authority.

Section 11. Where toilets are not provided for each individual unit, at each camp, there shall be provided at least one toilet for each sex and one to each ten trailers or living units, or fraction thereof. At least one urinal shall be provided for males where central toilet facilities are used. All collections of sewage from trailers or other vehicles or quarters shall be disposed of in a manner satisfactory to the health authority.

Section 12. All garbage and refuse shall be stored in metal cans with tight metal covers and shall be removed from the premises and disposed of daily, preferably by incineration or by burial.

Section 13. All buildings on the camp shall be properly screened with at least 16 mesh screening. All doors shall open outward and shall at all times be maintained in a condition to exclude flies, mosquitoes and other insects.

Section 14. All inspections of tourist camps shall be made in the presence of some one in charge of the camp, and a written report of findings together with recommendations shall be made to such person or to the owner. If the designated needed improvements have not been made, as determined by second inspection, the camp may be ordered closed and shall not reopen until such time as corrections have been made and approved in writing by the health authority.

Section 15. Wherever food or drink is sold or served the rules and regulations adopted by the State Board of Health for restaurant sanitation shall be complied with.

Section 16. The camp shall be subject to any other laws or regulations, state or local, which may pertain to health and sanitation.

Adopted by the State Board of Health on April 18, 1946.

Rules and Regulations Governing School Sanitation

It is essential to the preservation of the health of the children of the State that every school shall have a safe water supply and satisfactory system of sewage disposal. Therefore, pursuant to authority granted by the General Assembly of Georgia the Georgia State Board of Health hereby adopts and promulgates the following rules and regulations pertaining to school sanitation.

Section 1. Every school in this State shall be provided at all times when in use with an adequate supply of safe, potable drinking water, safely protected against pollution in conformity with plans approved by the State Health Department.

Section 2. All school buildings in this State shall be provided with an adequate system of sewage or excreta disposal of design and construction approved by the State Health Department, with separate compartments for each sex.

Section 3. Drinking fountains of a sanitary type approved by the State Health Department shall be provided at every school, or every pupil in attendance shall be required to have and to use an individual cup which shall be for his own exclusive use. Insanitary bubblers, inverted spigots, and other insanitary devices shall not be used.

Section 4. Any city, county, school board, trustee, or any person, firm or corporation contemplating the construction of or additions to any building to be used for school purposes in this State, shall submit, before contract for construction is let or work is started, duplicate plans and specifications to the State Health Department, showing clearly all details of the water supply system including the source of supply, and also all details of the sanitary facilities, sewerage system and sewage disposal, for approval. No contract shall be let or work started until such plans are stamped approved, and no changes in locations, additions, or alterations shall be made subsequent to this approval without the written consent of the State Health Department.

Section 5. Any school now in operation not conforming to any section of these rules and regulations shall after due notice be given one year from the date of such notice to comply with such provisions.

Section 6. If any school after a thorough inspection is found to be in an insanitary condition and a menace to the health of the pupils, orders for immediate corrections shall be issued by a duly authorized representative of the State Board of Health, and in event of the failure to comply with such orders the school may be closed until such corrections are made.

Section 7. Any school serving lunches such as milk or other items of food at the school or other establishment for the school shall be interpreted under the definition of "restaurant" under rules and regulations adopted by the Georgia State Board of Health relative to restaurant sanitation and it shall conform to such items of the regulations as may be required.

Adopted by the State Board of Health on October 19, 1944.

Rules and Regulations Governing Sewage Works

It shall be the duty of the mayor of each city, and of the proper officer of all private corporations, partnerships, and of individuals who shall hereafter install sewage works to file with the Georgia State Board of Health a true and correct description of the proposed system in the form of engineering plans and specifications. Such plans and specifications shall, upon their receipt by the State Board of Health, be inspected with reference to their effect upon public health, and if such Board finds that such sewage works, or any part thereof, is dangerous to individuals, or to the public generally, the said Board on its order may require such alterations as are necessary, or advisable.

To insure consideration of all essential details and to prevent waste of time in correspondence relative to missing and inadequate data, the following rules and regulations have been adopted to which plans submitted for approval must conform:

1. Submission of Plans and Specifications:

Plans and specifications must be submitted for examination at least two weeks prior to the date upon which action is desired. A minimum of two sets accompanied by a letter of transmittal is required.

2. Information Required:

The plans for a complete sewer system and sewage treatment

plant shall include the following: A general plan of the municipality or sewage works district . . . Profiles of all sewers proposed . . . Details of construction of manholes and special structures pertaining to the sewers . . . General and detail plans for sewage treatment plant.

Complete design data will accompany sewage treatment plant plans. These data will be furnished in duplicate on forms supplied by the Georgia State Board of Health.

3. General Plan:

The general plan shall be drawn to a scale not greater than 100, nor less than 300 feet to one inch, and shall show the entire area of the municipality, or district. If the municipality is greater than two (2) miles in length the map may be divided into sections, conforming in size to those mentioned later in these regulations. The sheets shall be bound together and a small index map supplied, showing by number the area covered by the various sheets. A general plan shall accompany each application, in the case of a new sewer system, or any extension or modification of any existing sewer system unless such general plan has already been submitted.

a. *Details of General Plans:*

This plan shall show all existing or proposed streets, the surface elevations at all street intersections, and contour lines at intervals of not more than ten feet. The plan shall also clearly show the location of all existing sewers, either separate or combined, the location of the sewage treatment plant and the location of existing and proposed sewer outlets or overflows. The true or magnetic meridian, the municipal or sewer district boundaries, title, scale and direction of flow shall also be clearly shown. The elevation of the highest known stream water level at the outlets and site of the sewage treatment plan shall be given. Any area from which sewage is to be pumped shall be shown by light shading, coloring or other distinctive marks.

b. *Elevations:*

Elevations of the surface of the streets should be placed outside the street line in the upper right angle, or opposite their respective positions in the street. The elevations of sewer in-

verts should be shown at street intersections, ends of lines, and wherever change of grade occurs. The elevations of surface shall be shown to the nearest 1/10 foot; those of the sewer invert to the nearest 1/100 foot. The sizes and gradients of all proposed and existing sewers shall be marked along the line of the sewer.

c. Sewer Appurtenances:

All sewer appurtenances, such as manholes, siphons and pumps shall be designated on the plan by suitable symbols and referenced by a legend near the title.

4. Profiles:

Profiles of sewer lines shall be prepared and drawn to such a scale as to clearly show the structural features of the sewer. Upon these profiles shall be shown all manholes, siphons and stream crossings with elevations of stream beds and normal stream water levels. Sizes and grades of sewers, surface elevations and sewer invert elevations should be shown with the same frequency as required for the general plan.

5. Grades:

The following grades for sewers flowing half full are suggested as minimum grades for ordinary use. When sewers are carefully constructed to these grades a theoretical velocity of approximately two feet per second can be obtained. This velocity will prevent settling of suspended matter and keep the sewer relatively clean.

Size of Pipe	Fall in feet per 100 ft. of sewer
8 inches	0.40 feet
10 inches	0.29 feet
12 inches	0.22 feet
15 inches	0.16 feet
18 inches	0.12 feet
21 inches	0.10 feet
24 inches	0.08 feet

The sewers should have a capacity when flowing half full sufficient to carry twice the future flow twenty-five years hence, plus a sufficient allowance for ground water infiltration.

When grades lower than those given are used, an explanation and reasons for the use of such grades should be included in the letter of transmittal. Each sheet of profiles must have an index of streets appearing on that sheet.

6. Sewer Details:

Detail drawings of all sewer appurtenances, such as manholes, inspection chambers, siphons and any special structures, shall accompany the general sewer plan. Detail plans shall be drawn to a scale suitable to clearly show the nature of the design of all details, such as manholes, manhole covers and frames, special valves and gates.

7. Sewage Treatment Plant:

The plans for the sewage treatment plant shall include a general plan upon which reserve area for future expansion is clearly shown. This general plan shall be drawn to a scale sufficiently large to be clear and shall show contours at one foot intervals both for existing ground and finished grades. It shall show the access road to the plant units and the point at which the access road connects with the existing road or street system. It shall show sufficient detail of plant units, pipe lines and other features to make the proposed sewage treatment process easily understood. The elevation of all units and water surfaces will be shown.

A sewage flow measuring device shall be provided at an appropriate point. When necessary a recording device may be required.

a. *Detail Plans:*

The detail plans shall show longitudinal and transverse sections sufficient to explain the construction of each sewage treatment plant unit.

8. Size of Drawings:

Plans will have maximum dimensions of 36 inches by 48 inches. By this regulation it is intended to prevent the use of long profiles and unnecessarily large maps, which are difficult to file or to use.

9. Title:

Each drawing shall have legibly printed thereon the name of the town or persons for whom the drawing is made, the name of the engineer in charge, the date, the scale, and such references in the title as are necessary for the complete understanding of each drawing. Sheets shall be numbered 1 of 10 or 2 of 15, etc., as the case may be. A space shall be provided for revision dates.

10. Specifications:

Specifications for the construction of the sewage works shall accompany all plans for new or original systems. With plans for extensions to existing systems, specifications may be omitted, provided that these extensions are to be constructed in accordance with specifications filed previously with original plans. If the plans are solely for extensions to an existing sewer system, then only such information as is necessary for comprehension of the plans will be required.

11. General Requirements, Application for Approval:

The application for approval of plans shall be made by the proper municipal authorities, persons for whom work is to be done, or their properly authorized agent, such as a consulting engineer employed to represent the municipality.

12. Separate Systems:

Under ordinary circumstances the Board will approve sewage works plans only when designed as a separate system in which all rain water from roofs, streets and other areas and all ground water, other than unavoidable infiltration is to be excluded.

13. Deviation From Approved Plans and Specifications:

No deviation from approved plans and specifications shall be made unless amended plans and specifications showing proposed changes, have been submitted to and approved by the Board's engineer.

Adopted by the State Board of Health on April 15, 1948.

Oysters and Oyster Beds—Regulated

GEORGIA LAWS 1943.

Section 1. *Minimum regulations; Contaminated areas; Confiscation; Interstate shipments; Closed season; Replanting; Prohibitive size; Record kept; Sanitation.*—That pursuant to that Act the General Assembly of Georgia approved February, 1943, authorizing the State Game and Fish Commission and the Director thereto to fix open and closed seasons and to regulate the manner and method of taking, transporting, storing and using, among other products, shellfish or crustaceans, there are hereby fixed certain minimum regulations which the Director shall fix in the manner prescribed by said Act, but the minimum regulation set forth herein shall not be held to deprive said director of the power to promulgate further rules and regulations with reference to shellfish or crustaceans, provided that no rules or regulations promulgated by the State Game and Fish Commission or the Director thereof shall be held to modify, amend, change or affect the minimum regulations herein set forth. The minimum regulations which the Director shall promulgate by or before April 1, 1943, shall include the following:

(a) That the Director under the Game and Fish Commission in fixing the area which is or may be leased to any person by such Director, the Game and Fish Commission or any private owner to any other person, firm or corporation for the purpose of planting, growing, gathering, marketing, or selling of oysters, shellfish or crustaceans shall require that the applicant for any such lease furnish to the Department of Public Health charged with the responsibilities of maintaining the health of the citizens of this State, a plat or survey of the lands proposed to be leased, but no such lease contract shall be entered into or become effective until such Department shall issue its certificate, that the particular area in question is not contaminated in any way and that the waters on or adjacent to such area are not polluted or do not contain any matter which would make the taking of oysters, shellfish or crustaceans, in any way dangerous to the life or health of persons consuming oysters, crustaceans, or shellfish removed therefrom. Any oysters, shellfish or crustaceans removed from an area concerning which certificate has not previously been issued, shall be sub-

ject to confiscation and immediate destruction by any authority of the State Game and Fish Commission as menacing the public health. Such certificate may be revoked upon subsequent findings by the Health Department.

(b) The Department of Public Health shall promulgate such sanitary rules and regulations meeting minimum requirements of the United States Public Health Service and based upon recommendations made by the Committee on Sanitary Control of the Shellfish Industry for interstate shipments, and for the purpose of interstate shipment the Department of Public Health shall certify to all requirements of the U. S. Public Health Service as may be required under approval for interstate shipments. Such rules and regulations shall apply to oyster beds, or areas, and to shucking houses, equipment, and sanitary handling, preparation and shipping. (Reference—United States Public Health Service Minimum Requirements for Approval of Shellfish Control Measures and Certification for Shippers in Interstate Commerce.)

(c) No person, firm or corporation shall pick, tong, dredge or in any other manner take or catch oysters from any of the waters of this state from the first day of May to the thirty-first day of August, except for the purpose of replanting the same in the waters of this state, subject to the regulations prescribed by the State Game and Fish Commission.

(d) Every person, firm or corporation owning or operating a factory for the canning of oysters, or a raw oyster shucking Plant in this State, shall each year distribute upon the areas designated by the State Game and Fish Commission or its authority a quantity of oyster shells not exceeding $33\frac{1}{3}\%$ of the quantity required by such cannery or raw shucking plant during the preceding open season; which distribution or replanting shall be done under the direction or supervision of the State Game and Fish Commission or its authority within a radius of twenty miles from the factory or shucking plant distributing the same and before the first day of June. Any failure or refusal to comply with this regulation shall subject the cannery or shucking plant to revocation of its license by the State Game and Fish Commission.

(e) No oysters shall be taken from the public grounds of this State where the shells of such oysters measure less than

three inches from hinge to mouth, except that oysters less than three inches from hinge to mouth may be removed if attached to an oyster of that minimum size and such oyster so attached cannot be removed without destroying such three-inch oyster. And it shall be unlawful for any person, firm or corporation engaged in shucking or canning oysters for market, to shuck, can, purchase, or have in possession any quantity of oysters containing more than 5% of oysters of prohibitive size as herein defined.

(f) All managers or persons in charge of canning factories for the canning of oysters shall be required to keep a book in which shall be entered the name and address of each person from whom he shall purchase oysters, whether in the shell or shucked, together with the date of purchase and the quantity purchased; such book to be of the size and description prescribed by the State Game and Fish Commission. Such persons shall also retain duplicates of all bills of lading, memorandum or receipts or other indications of shipment made by them on file for comparisons with such books, and shall make a written report to the State Game and Fish Commission not later than the fourth day of each calendar month setting forth in form satisfactory to the Commission a full statement of the operations of such canning factory or raw shucking plant as to quantity purchased, quantity sold and any other detailed information which may be required by the regulation of the State Game and Fish Commission.

(g) All premises, sheds, utensils, measure, tools and implements used on premises of canneries or shucking plants must be kept in a sanitary condition, and to that end the State Department of Public Health charged with the responsibilities of maintaining the health of the citizens of the State, shall, from time to time, prescribe such rules and regulations to this end as may be advisable, and any person, firm or corporation who shall violate such regulations on more than one occasion shall be subject to laws of license or to revocation of license by the said Commission.

Section 2. *Tax; Stamps.*—Be it further enacted by the authority aforesaid that there is hereby imposed a tax on all oysters gathered from the waters of this State and shipped from any point within this State in the amount of five cents for each gallon of raw shucked oysters or in the equivalent thereof of

oysters in the shell 6c for each 180 ounces on canned oysters, and such tax shall be paid by the person shipping such oysters. All oysters within the limits of this State, whether shucked or in the shell, shall be deemed prima facie gathered from the waters of this State unless there be attached to or affixed upon the container of such oysters evidence satisfactory to the State Game and Fish Commission as prescribed by any regulation made by it going to show that such oysters were gathered in some State other than the State of Georgia. The evidence of payment of the tax imposed herein shall be the affixing of cancelled tax stamps in the proper amount to any container of such oysters, which stamps shall be of a design and material as prescribed by the State Game and Fish Commission, and the sale of which stamps shall be under the direction and control of such Commission. The proceeds from the sale of such tax stamps by said Commission shall be remitted by it or its duly authorized officer or agent to the State Treasurer on the fifteenth day of each calendar month.

Section 3. *Misdemeanor.*—Be it further enacted by the authority aforesaid that any person who shall violate any of the terms or provisions of this Act or any regulations promulgated hereunder shall be guilty of a misdemeanor and shall be punished as provided by law for the punishment of misdemeanors. (Acts 1943, pp. 543-547.)

Shellfish and Oyster Beds—Sanitary Conditions.

GEORGIA LAWS 1943.

Section 1. *Inspection by Health Department.*—Be it enacted by the General Assembly of Georgia, and it is hereby enacted by authority of the same that it shall be the duty of the Department of Health of the State of Georgia to inspect, or cause to be inspected, as often as said department may deem necessary, the various oyster beds and other places within the jurisdiction of or forming a part of the State of Georgia from which oysters are taken to be distributed or sold for use as food, for the purpose of ascertaining the sanitary conditions of such oyster beds and the fitness of the oysters in such places or which are taken therefrom for use as food.

Section 2. *Polluted beds condemned; Permit required.*—Be

it further enacted that if the State Department of Health discovers that any oyster bed, or other place from which oysters are or may be taken is subject to pollution or to any other condition which may render the oysters in such places, or which may be taken therefrom, dangerous to health, it shall be the duty of said department to immediately condemn such areas, beds, or other place; and to prohibit the taking of oysters from such places, and also to prohibit the sale, distribution, offering for sale, giving away or having in possession such oysters without a permit from such department to take, sell, distribute, give away, or offer to sell or have in possession.

Section 3. *Evidence*.—Be it further enacted that for the purpose of this Act, the distribution, sale, offering for sale, giving away or having in possession with intent to distribute, sell or give away any oysters shall be prima facie evidence that such oysters were intended for use as food.

Section 4. *Rules and regulations*.—Be it further enacted that the State Department of Health shall have the power to adopt, promulgate and enforce such rules and regulations as shall promote the purposes of this Act, and it shall also have power to make such specific orders regarding the growing and handling of oysters and the disposal of polluting matter which may affect the purity of oysters as it may deem necessary to enforce the provisions of this Act.

Section 5. *Rights and powers*.—Be it further enacted that the members and employees of the State Department of Health shall have free access at all times to all oyster beds, places of business and other places where oysters are grown, kept, stored, had in possession with intent to distribute, or sell, or give away, or sold, and also to all streams, tributaries thereof and lands adjacent thereto, the waters draining from which may come in contact with oysters and shall have the power to make such inspection of such places and to take such samples of oysters as they may deem necessary to carry out the purposes of this Act.

Section 6. *No interference*.—Be it further enacted that no person shall obstruct or in anywise interfere with any inspector or employee of the State Department of Health in the performance of any duty under this Act.

Section 7. *Penalty for violation.*—Be it further enacted that any person or persons convicted of a violation of the provisions of this Act shall be punished as for a misdemeanor. (Acts 1943, pp. 583-585.)

Oyster Gathering Permits.

GEORGIA LAWS 1945.

Section 1. Each and every commercial fisherman shall, each year prior to engaging in commercial oyster gathering, obtain an oyster collector's permit from the office of the Supervisor of Coastal Fisheries of the State Game and Fish Commission. The permit shall be in the form of a chart to which is attached or affixed the date, the name of the individual, the company for which the individual is working, and the number of the State Health Certificate. The chart shall show the areas from which oysters can not be taken because of pollution as determined by the State Department of Public Health. A master chart showing the pollution zone shall be kept on file at the office of the Supervisor of Coastal Fisheries. The chart shall also show the areas from which the applicant may obtain oysters by virtue of demonstrated authority.

1. Lease of State owned lands.
2. Ownership of lands or authorized agent for owner.
3. Lease of lands from land owners.
4. Permit from Coastal Fisheries Office to remove oysters from natural oyster beds on unleased State lands.

A duplicate oyster collector's permit, with chart, shall be filed with the Coastal Fisheries Office of the State Game and Fish Commission.

Section 2. The permits provided for in Section 1 shall be furnished by the office of the Coastal Fisheries free of charge. The Coastal Fisheries Office shall furnish sufficient charts covering the areas of operation to cover needs. These charts shall be recent U. S. Coast and Geodetic Survey charts or accurate facsimiles of same.

Section 3. Every person while engaged in commercial oyster collection from oyster beds shall carry with him the permit

issued under the terms of this Act, and it shall be unlawful for any person to engage in oyster collection for commercial purposes, without first having with him the permit to do so. It shall also be unlawful for any person to collect, or engage in collecting oysters from any polluted areas or sources, or from any areas or sources other than shown as authorized for use by the permit granted to him. The violation, by any person, of the terms of this Act shall be punished as for a misdemeanor.

Section 4. Nothing in this Act shall prohibit an individual from taking not to exceed two bushels per day for his own use when authorized to do so by written permission of the land owner, which written permission shall be in the possession of the person so taking same. (Acts 1945, pp. 198-199.)

Oysters—Shipping Regulated.

GEORGIA LAWS 1945.

Section 1. That each and every person, firm or corporation handling or shipping oysters in the shell, in addition to the requirement set forth in the Act hereby amended, shall when shipping oysters in the shell, ship them in clean containers in either barrels, bags, crates or baskets. To each such barrel, bag, crate or basket there shall be attached a tag obtained from the Coastal Fisheries Office, which tag shall be furnished free of cost, which tag shall indicate the source, date of gathering, name and address of consignee, kind of shell stock in container, name of shipper and State Public Health Certificate number. There shall be attached to the reverse side of the tag occupational oyster stamps in a sufficient number showing that the tax as required by Section 2 of the Act of 1943, which act is hereby amended, has been fully paid.

Section 2. Each and every person, firm or corporation who shall fail to ship or handle oysters in shell stock in clean containers, in either barrels, bags, crates or baskets, or shall fail to attach thereto the tag containing the information called for in Section 1 of this Act shall be guilty of a misdemeanor and shall be punished as for a misdemeanor. (Acts 1945, pp. 164-165.)

Rules and Regulations Governing Shellfish Sanitation

Pursuant to law the Board of Health of the State of Georgia promulgates and adopts the following sanitary rules and regulations and authorizes the Georgia Department of Public Health to enforce same. Such rules and regulations are based upon the United States Public Health Service minimum requirements for approval of shellfish control measures and certification for shippers in interstate commerce.

1. *Shellfish Defined*: For the purpose of these regulations the term "shellfish" is hereby declared to include oysters.

2. No shellfish shall be taken from any water except from such areas as have been approved by the Georgia Department of Public Health. Such approval shall be based upon the recommendations of the Committee on Sanitary Control of the Shellfish Industry and upon such requirement of the United States Public Health Service to meet approval for interstate shipment.

PROVIDED: That removal of shellfish from areas not so approved shall be permitted for the purpose of relaying in approved waters only during the closed season for marketing and not less than 15 days prior to the opening of the next market season.

PROVIDED FURTHER: That permission may be granted by the Georgia Department of Public Health for removal of shellfish from unapproved areas during the open season and to market them after relaying in a large body of clean water, but only under written request to said Department and its written approval and that such removal and relaying shall be under immediate and constant supervision of a representative of said Department and conforming to sections (a) (b) (c) (d) and (e) under "United States Public Health Service Minimum Requirements for Approval of State Shellfish Control Measures and Certifications for Shippers in Interstate Commerce."

3. *Floating*. Shellfish shall not be "floated," stored or cleansed in water the standard purity of which is not at least as rigid as that prescribed for growing areas or beds. (Attention is also directed to the requirements of the U. S. Bureau of Chemistry concerning the salinity of water used for floating.)

4. *Boats.* All boats used in the taking and handling of shellfish shall be kept in such a state of cleanliness and repair that shellfish hauled or stored thereon shall not be subject to contamination by bilge water, through leakage or polluted water, or by other means. Decks, holds, or bins used for storage on boats shall not be washed with polluted water. Reasonable precautions shall be observed by fishermen while boats are in waters over shellfish grounds to prevent the pollution of such grounds through the discharge of human wastes.

5. *Storage.* Shellfish held in storage must be so kept at all times that they will not become contaminated.

6. *Records.* Every person, firm or corporation that conducts any wholesale business of buying, selling or shipping shellfish shall keep an accurate daily record which shall show the names and addresses of all persons from whom lots are received, the source of each lot, and the names and addresses of all persons to whom lots are sold or shipped. Such records shall be open to inspection at any time during business hours by any duly authorized representative of the State Health Department.

7. *Shucking and Packing Plants.*

I. Construction

(a) *Lighting and ventilation* shall be adequate in all parts of the building used.

(b) *Washing and packing* rooms shall be separate from shucking rooms. They shall also be so constructed throughout as to permit easy and thorough cleaning and to afford adequate protection against flies.

(c) *Floors* shall be so constructed that they may be easily and thoroughly cleaned, and that drainage of all water therefrom shall be complete and rapid.

(d) *Storage bins or storage rooms* for shell stock shall be so constructed as to permit easy and thorough cleaning and drainage.

(e) *Shucking benches* shall be of an approved sanitary type. Such benches, and walls immediately adjacent thereto to a height of 2 feet above the benches, shall be of a smooth material and so constructed as to be easily and thoroughly cleaned.

(f) *Sanitary toilets*, which shall be separate from shucking and packing rooms, must be provided for employees. If a privy is used it shall be a sanitary type, constructed and located under the approval of the State health agency.

(g) *Refrigeration rooms or ice boxes* for the retention of shellfish must be so constructed as to permit easy and thorough cleaning. It is recommended that the floor of the refrigeration room be constructed of concrete and that the ice box have an impervious lining.

II. Equipment

(a) *Water*. The plant shall be provided with an abundant supply of water, preferably under pressure, from a source approved by the State health agency.

(b) *Hot Water*. Hot water in sufficient amount for all purposes shall be available when the plant is in operation.

(c) *Lavatories*, with running water, shall be provided, together with soap and individual towels.

(d) *Utensils*. Shucking pails, measures, skimmers and colanders, tanks, tubs and paddles shall be made of a non-corrosive, non-rusting, smooth, impervious material, and constructed in such manner as to eliminate grooves, seams and cracks where food particles and slime will collect. All seams and joints shall be well filled with solder and dressed to a smooth surface. The handles of opening knives should be so constructed as not to contain cracks and crevices which would retain food particles and slime.

III. Operation

(a) *General cleanliness*. During the operating season the plant shall be used for no purpose other than the handling of shellfish or other seafoods. Material foreign to this particular business shall not be stored within the operating part of the plant. All abandoned equipment should be removed from the plant, and the floors in every way kept clear for thorough cleansing. The unoccupied portion of the storage bins, the shucking benches, and all the floors shall be swept and flushed with water of an approved quality at least once every day, at the completion of the day's run, until they are thoroughly

clean. The use of polluted water for flushing or cleansing purposes shall not be permitted. A safeguard recommended is that of following the cleansing with a thorough flushing with scalding water or a solution of calcium or sodium hypochlorite of approved strength. This treatment is particularly advisable in the case of shucking benches. Refrigeration rooms or ice boxes shall be washed out and scalded once a week, or more often if necessary. Once a week the cleansing shall include the washing of walls.

(b) *Personal cleanliness.* All employees shall wash their hands thoroughly with running water and soap on beginning work and after each visit to the toilet. Signs to this effect shall be posted in conspicuous places in the plant by the operator. Gloves or other protection for the hands shall be of such material as can be easily and thoroughly cleaned.

(c) *Sterilization.* An adequate supply of boiling water shall be available for the sterilization of utensils. All utensils and tools, such as opening knives, shucking pails, measures, skimmers, colanders, tanks, tubs and paddles, which come in contact with shellfish, shall be thoroughly scoured until clean, and then sterilized by steam in a steam chamber or box, or by boiling water. Such sterilization may be carried out before beginning work, or at the close of the day if the articles are stored overnight so as not to become contaminated. Returnable shipping cans must be cleaned and sterilized by steam prior to refilling, and non-returnable cans shall be rinsed with hot water before filling. The use of shipping containers other than metal for shucked stock is not approved.

(d) *Floor shucking* shall not be permitted. Floors used by shuckers shall not be used for the storage of shellfish or for the retention of shucking pails. Where shellfish are stored in the shucking room, adequate protection shall be provided for the storage space to prevent possible contamination from wash water, wastes, and from the feet of the employees. Shucking pails shall be so placed as to exclude the drippings from shells and from the hands of the shuckers.

(e) *The "nesting"* of empty pails shall not be permitted while the plant is in operation.

(f) *Refrigeration.* The cooling of shucked shellfish shall be effected as quickly as possible after the shellfish are shucked.

For the refrigeration of shucked stock, outside containers shall be provided for ice, and no ice or other foreign substance shall be allowed in contact with the shellfish. A temperature of 50° F., or below, but above freezing, shall be maintained in refrigerators where shucked shellfish are stored.

(g) *Washing shucked stock.* Shucked shellfish shall be thoroughly washed with cold water of an assured purity. (Attention is directed to the requirements of the U. S. Bureau of Chemistry as to water content of oysters, in connection with possible "soaking" during the washing process.)

(h) *Waste disposal.* Shells, washings and other wastes shall be disposed of in such a manner as not to cause a nuisance.

IV. Communicable Diseases

(a) *Examination of employees.* All applicants for employment shall be inspected to observe any evidence of active infection and questioned as to whether the applicant has previously suffered an attack of typhoid (or para-typhoid) fever, or has recently been in intimate contact with any such case. This examination should preferably be made by a physician, but, if this is not practicable, it shall at least be made by an intelligent and competent person under instructions from the State or local health department, and all suspicious cases shall be referred to a physician. No person who has any communicable disease, or any infected wounds on the hands or arms, shall be employed or retained in any shucking or packing plant.

(b) *Examination for carriers.* In the case of any individual giving a history of a previous attack of typhoid fever or suspected typhoid fever (or para-typhoid), bacteriological examination of stools and urine, in the laboratory of the State department of health or in such other laboratory as that department may designate and approve, shall be required. Any carriers of typhoid (or para-typhoid) bacilli thus detected shall be excluded from employment.

Only the following paragraphs, lettered as above, shall apply to plants handling shell stock exclusively:

- I. a, c, d, f.
- II. a, c.
- III. a, b, h.
- IV. a, b.

8. *Shipping.*

(a) *Shell Stock*

- I. Shell oysters and clams shall be handled and shipped under such temperature conditions as will keep them alive. It is recommended that the temperature be kept below 50° F., but above freezing. Detailed instructions to this effect should be printed on the barrel, sack or tag.
- II. Shell oysters and clams shall be packed in clean barrels or sacks plainly marked with the name and address of the shipper and the name and address of the consignee, together with the name of the State of origin and the certificate number of the shipper.

(b) *Shucked Stock*

- I. Shucked stock shall be stored and shipped under such temperature conditions as will prevent spoilage. Outside containers shall be provided for ice, and no ice or other foreign substance shall be allowed to come in contact with the shellfish. (It is recommended that shucked stock be kept at a temperature of 50° F., or below, from the time it leaves the shipper until it reaches the consumer, but that it not be allowed to freeze.)
- II. Shucked oysters and clams shall be packed and shipped in containers sealed in such manner that tampering is easily discernible, and marked with the identification mark of the shipper or packer. Shipments shall be so tagged or labeled as to show the name and address of the consignee, the name and address of the shipper, the name of the State of origin, and the certificate number of the shipper.

9. Every person, firm or corporation that conducts a shucking plant, or obtains oysters, shucked or unshucked, from any source and sells or ships or otherwise disposes of same to any person, firm or corporation, shall keep a daily record of the amount of oysters so disposed of, showing name and address of receiver or consignee and destination. Such record shall be available at all times to a representative of the State Health Department.

Routine of Operations

The following routine is prescribed for operation of these laws and regulations. Such will apply unless changes or revisions are agreed upon by the Directors of the Department of Public Health and Game and Fish Commission.

1. In conformance with law, the applicant for a lease will make application to the Director of Game and Fish together with a plat or survey of the area proposed to be leased.
2. A copy of such application and plat will be forwarded by the Director of Game and Fish to the Director of Public Health for the purpose of sanitary surveys and investigations of the proposed area. This will involve physical surveys of the area and bacteriological examinations of the overlying waters and the oysters thereunder.
3. If such area is certified to the Director of Game and Fish the applicant through such Director will make application to the Director of Health to proceed with plant construction and procurement of necessary equipment.
4. Letter of authorization to proceed with construction and procurement of equipment will be furnished the applicant by the Director of Public Health through the Director of Game and Fish.

The applicant will receive assistance from the Department of Public Health in meeting the sanitary requirements of construction, equipment and maintenance.

5. When the Department of Public Health is satisfied that all such sanitary requirements have been met, the Director of Public Health will forward to the Director of Game and Fish a certificate for operation.
6. This certificate will be considered by the Director of Game and Fish as one of the requirements before issuing a license as set forth by law.
7. Renewals or revocations of either operating certificate or license will be based upon agreement of both Departments. Revocation by either of the Departments shall be automatic with both.

8. The operating certificate issued by the Director of Public Health cannot be retained by the applicant unless all sanitary requirements are met and maintained subject to inspections and discretion of the Department of Public Health.
9. Necessary forms for certificates, inspections and other purposes will be provided for such operation.

Adopted by the State Board of Health on March 18, 1943.

Rules and Regulations Governing the Preparation, Picking, Packing, Shipping, and Sale of Crab Meat.

Pursuant to law the Board of Health of the State of Georgia promulgates and adopts the following sanitary rules and regulations governing the preparation, picking, packing, shipping, and sale of crab meat and authorizes the Georgia Department of Public Health to enforce same.

1. *Definitions:* The following definitions shall apply in the interpretation and enforcement of these regulations:
 - (a) *Crab Meat:* The term "crab meat" shall be construed to mean and include the edible meat of boiled or steamed crabs, distributed for consumption without further process than picking, chilling, and packing in containers not hermetically sealed.
 - (b) *Picking Plant:* The term "picking plant" shall be taken to mean and include any establishment in which crab meat is prepared, picked, and packed in containers not hermetically sealed.
 - (c) *Person:* The term "person" shall be taken to mean and include any individual, partnership, corporation, or association.
2. Every person who operates a plant where crab meat is prepared, picked, and packed for sale in any manner shall possess an unrevoked certificate of satisfactory compliance with the requirements herein set forth, from the Georgia Department of Public Health, provided, that these

provisions shall not apply to the preparation and picking of crab meat in the kitchens of eating establishments for consumption on the premises.

3. The Georgia Department of Public Health shall issue annually (calendar year) serially numbered certificates to persons who operate picking plants in conformance with these regulations. The certificate held by any person may be revoked by the Georgia Department of Public Health because of violation of any section or part of any section of these regulations, provided, that after complying with such revocation, the owner or operator may appeal to the Georgia Department of Public Health for reinstatement of such certificate.
4. The packer's certificate number preceded by the State abbreviation shall be impressed, embossed, lithographed, or otherwise permanently recorded on every can of crab meat prepared, picked, and packed in the plant, or on the cover if the cover becomes an integral part of the container during the sealing process. No person shall sell, or offer for sale, or have in possession or storage where crab meat is sold or served, any can of crab meat which does not display on its exterior the serial number of a currently held certificate issued by the Georgia Department of Public Health, or of a certificate issued by the Department of Health of another State with which certification reciprocity is practiced.
5. *Picking Plant Construction:* Picking plants shall be of substantial construction, which shall include the following minimum requirements:
 - (a) The plant shall be so arranged that adequate space is provided for the various operations. No rooms used for domestic purposes shall open directly into any room of the plant. The packing and/or weighing room shall be completely screened or otherwise completely segregated from any other room or rooms of the plant.
 - (b) Lighting and ventilation shall be adequate throughout all parts of the building.
 - (c) Floors, and walls to a height of eighteen (18) inches,

of all rooms in which crabs are boiled or steamed, backed, washed, picked, or packed, shall be of impervious material. Adequate floor drainage shall be provided. Walls and ceilings of rooms in which crab meat is picked or packed shall be tight, smooth, and painted with light colored water-proof paint, provided, that walls of non-corrosive, impervious material need not be painted.

- (d) Cooking, backing, picking, and packing rooms shall be adequately screened with 16-mesh screen wire. Screen doors shall open outward, and shall be so hung or equipped that they will close automatically.
 - (e) Storage space shall be provided for crab meat picking knives and other utensils used. This shall preferably consist of an enclosed, fly-tight cabinet, with shelves of dressed lumber or metal.
 - (f) Chutes for the delivery of backed and washed crabs to the picking tables, if used, shall be constructed of non-corrosive metal, with tight joints, or shall be non-corrosive metal lined.
 - (g) Lavatories, with hot and cold running water, shall be provided, together with a supply of liquid or powdered soap, and individual towels, and located in the picking room, convenient to both pickers and packers.
 - (h) Every picking plant shall be provided with an adequate supply of potable water, from a source and of a quality approved by the Georgia Department of Public Health.
 - (i) Every picking plant shall be provided with facilities for the sanitary disposal of human wastes, conveniently accessible to the employees, and constructed and operated in a manner approved by the Georgia Department of Public Health. Toilet rooms shall not open directly into any room of the picking plant.
6. *Equipment of Picking Plants:* The equipment of every picking plant shall conform to the following minimum standards:
- (a) Hot water, under pressure, in sufficient amount for

all purposes shall be available at all times during plant operation, and shall be maintained at a temperature of not less than 130° F.

- (b) All backing and/or picking tables or benches, and weighing and/or packing tables or benches shall be constructed of impervious material, the tops sloped inward, or otherwise constructed, so as to prevent drainage to the outer edges and onto the clothing of pickers or packers, and so as to provide complete drainage of all working surfaces. In the case of wall tables or benches, the impervious top shall extend at least eighteen (18) inches above the table or bench level on the back wall and sides, and shall be rounded at the junction of table and wall to facilitate cleaning.
- (c) Chairs or stools used by pickers shall preferably be of metal construction.
- (d) Mechanical refrigeration or an ice box of good construction and in good repair, and capable of maintaining a constant temperature of 50° F. or below, of sufficient capacity to handle the plant output, shall be provided. The ice box shall have non-porous, non-corrosive lining that does not leak. Refrigerators or ice boxes shall be provided with properly trapped drains, and shall be readily cleanable.
- (e) A rack, raised above the floor, shall be provided for the temporary storage and washing of ice to be used in brining or packing crab meat. A metal receptacle, of such design as to receive all the ice and to prevent the exposure of the crushed, chipped, or shaved ice to foot-traffic contacts, shall be provided.
- (f) All utensils and containers used in the cooking, washing, draining, or handling of crabs or crab meat shall be of non-corrosive metal or other smooth, impervious material.
- (g) Crab meat picking knives shall be of sanitary, one-piece, metal construction. Blocks and hammers used for cracking claws must be of smooth metal. Wooden blocks or hammers are not permitted for claw cracking purposes. Devices used for cracking in the pro-

cess of picking crab meat shall be of an impervious and non-corrosive material, readily cleanable.

- (h) Where chlorine solution is used for bactericidal treatment of utensils, a container of non-corrosive material of sufficient size to completely submerge the largest utensil to be treated shall be provided to hold the chlorine solution.

7. *Picking Plant Operation:* Picking plant methods and operations shall conform to the following minimum requirements:

- (a) The interior of the plant and its immediate exterior surroundings shall be kept free of rubbish, abandoned equipment, and extraneous material.
- (b) Floors shall be thoroughly cleaned at least once each day, and all interior walls, ceilings, windows, ledges, shelves, and other integral parts of the building, and all used equipment shall be kept clean.
- (c) All rooms in which crabs are backed, picked, or packed shall be kept free from flies, other vermin, and domestic animals.
- (d) Crab backing, washing, picking, brining, and packing shall be conducted in the plant. Crab boiling or steaming should preferably be conducted inside the plant, or otherwise in a fly-tight enclosure immediately adjacent to the plant.
- (e) All crabs shall be inspected before boiling or steaming and all dead crabs shall be rejected.
- (f) Crab waste shall be placed in metal containers and removed from the picking plant at frequent intervals. Such waste shall not be allowed to remain in the picking plant overnight, and shall be disposed of in a manner to avoid nuisance. Waste receptacles shall not be used for other purposes, nor vice versa.
- (g) The washing of backed crabs shall be conducted in clean running water, from a source approved by the Georgia Department of Public Health, either separately, or in baskets or containers with perforated bottoms which provide free and rapid drainage.

- (h) Cooked crabs, and receptacles or instruments used for handling them, shall not be permitted to come in contact with the floor or with any surface exposed to foot traffic.
 - (i) Picked crab meat shall not be allowed to accumulate on picking or packing tables. Crab meat shall be picked direct into the one-pound shipping can. The picking of meat into picking pans and re-packing to one-pound containers is not permissible. In delivering meat to the packing department, cans shall not be placed one upon the other.
 - (j) Picked crab meat shall be packed as promptly as possible, and shall be chilled immediately after packing. An adequate supply of ice shall be on hand when operations are begun, and ice shall be rinsed with clean water, from a source approved by the Georgia Department of Public Health, before being placed in the refrigerator or ice box, or before being crushed.
 - (k) If brining of crab meat is practiced, the meat shall be sprayed with brine and not immersed. The brine shall be kept in a clean, suitable container, constructed of non-corrosive material and readily cleanable, and made up fresh at frequent intervals.
 - (l) Shipping containers such as barrels, boxes, kegs, or tubs, in which cans of crab meat are packed for shipment, shall be clean and free of extraneous material. Crab meat cans shall be stored in a clean, dry place, preferably in the original shipping carton. If stored outside of original shipping carton or if original carton is broken, cans shall be stored in dry, clean, and fly-tight place, easily accessible to washing and sterilizing facilities.
 - (m) Children and loiters shall not be permitted in any picking plant during operations.
8. *Cleaning, Bactericidal Treatment, and Storage of Equipment and Utensils:* The methods of cleaning, bactericidal treatment, and storage of equipment and utensils shall conform to the following minimum requirements:

- (a) Cooking kettles or vats shall be drained, flushed out, and scrubbed often enough to avoid accumulation of organic matter and after each day's use.
 - (b) Crab washing sinks, containers in which crabs are handled, tables, benches, chutes, floors, and waste receptacles shall be thoroughly cleaned with hot water and soap, and flushed with boiling water or chlorine solution after each day's use. After cleaning, containers in which crabs are handled shall be properly stored, off the floor.
 - (c) Colanders, picking knives, ice tools, and other equipment of a like nature shall be thoroughly cleaned with hot water and soap, then immersed for at least five (5) minutes in boiling water, or immersed for at least two (2) minutes in chlorine solution. After treatment, these utensils shall be stored in a fly-tight cabinet.
 - (d) Ice boxes or refrigerators shall be cleaned each time they are emptied of crab meat and flushed with clean water, from a source approved by the Georgia Department of Public Health, and rinsed with chlorine solution.
 - (e) For the purpose of these regulations, plants using chlorine solution as a bactericidal agent shall maintain during hours of operations a chlorine solution of a concentration of approximately one hundred (100) parts per million available chlorine and shall keep on hand at all times a supply of powdered or concentrated chlorine compound solution for making fresh chlorine solutions as needed.
9. *Cleanliness and Health of Personnel:* All personnel employed in a picking plant shall be governed by the following minimum requirements:
- (a) Employees shall wash their hands in running water, from a source approved by the Georgia Department of Public Health, with liquid or powdered soap and rinse them with a chlorine solution of at least one hundred (100) parts per million available chlorine, before beginning work and each time work is resumed

after interruption during which contamination of the hands was possible. Signs to this effect, provided by the Georgia Department of Public Health, shall be conspicuously posted in every picking plant. The use of a common towel is prohibited.

- (b) Employees shall wear reasonably clean outer garments. Pickers and packers shall wear clean aprons and caps which cover the hair. In hot weather, fine mesh hair nets may be worn in lieu of caps, but these shall effectively cover and hold the hair in place. Street clothes of employees not worn during plant operations shall not be kept in the cooking, backing, picking, or packing rooms, unless they are stored in lockers specifically provided for such purpose.
- (c) Employees shall not keep cloth towels or napkins on their persons to wipe their hands during backing, picking, or packing operations. Paper towels may be provided for this purpose if needed.
- (d) Employees shall not use finger cots while handling crabs or crab meat.
- (e) Employees may use rubber gloves in the backing operation.
- (f) No person known or suspected to be afflicted with communicable disease, or in whose home a case of communicable disease is known to exist, shall be employed in a picking plant, or permitted to enter it. Employees exhibiting any sores or lesions on their hands shall not be permitted to work.
- (g) Every person operating a picking plant shall keep on file a health certificate on each employee working in said plant. Each health certificate shall be renewed at least once each year and comply with the food handling regulations of the local Health Department.

10. *Sanitary Quality of Crab Meat:* Crab meat as prepared and offered for sale, shall at all times be free of adulteration and from contamination, as determined by bacteriological examination.

Adopted by the State Board of Health on April 15, 1948.

Tourist Camp Sanitation

See Restaurant and Tourist Camp Sanitation laws and regulations, pages 148-163 of this bulletin.

Policy of Admission and Discharge of Patients at Battey State Hospital

In order to employ the limited number of patient beds at Battey State Hospital, the state tuberculosis sanatorium, to the best advantage in tuberculosis control and to provide the greatest service to the state, it is necessary to admit patients on a selective basis, and as it is recognized by health authorities that control of tuberculosis is dependent, primarily, on the control of patients with communicable tuberculosis, the following rules and regulations of admission, duration of stay, and discharge are adopted and promulgated as a revised declaration of the rules and regulations of the State Board of Health:

1. Preference in the admission of patients is to be given to the applicants who, in the opinion of the Battey State Hospital Staff, are most urgently in need of treatment and who are most likely to benefit therefrom. Due consideration will be given to public health problem cases where there is an opportunity to prevent infection of persons not previously exposed to tuberculosis, particularly children and young adults, and these patients, along with difficult and apparently insoluble problem cases in home care, will be on the same level of urgency as regards admission except that the emergency medical care cases will always have first preference. The superintendent of Battey State Hospital will determine whether the applicant should be classified as an urgent and difficult problem of care case on the basis of the reports submitted by the local health department representative or by a representative of the regional health office, or of the local board of health when the service of a local or regional health department is not available. This report must show in detail the actual facts regarding the condition of the patient, the social economic status of the patient and his family, and the reasons why the needs of the patient cannot be met locally, and should include, whenever possible,

reports by medical social workers and local welfare departments. Copies of these reports are to be sent by the local and regional health departments to the Division of Tuberculosis Control of the Georgia Department of Public Health, as well as to Battey State Hospital. Special report forms are to be supplied by the Division of Tuberculosis Control to local and regional health departments for this purpose.

2. With the exception of those cases which are considered to be emergencies by the Staff, all cases will be admitted in the order in which they applied. It shall be the duty of the Staff to accept the more unfavorable type cases as more beds are opened, but never to liberalize admissions to the point where the earliest possible admission of moderately and far advanced cases with favorable or questionable prognosis would be seriously interfered with.
3. Patients who refuse treatment, violate hospital rules or otherwise become obnoxious to the point of interference with treatment of other patients, are not eligible for readmission unless there be an indication for some type of surgical collapse or extirpation that cannot be secured elsewhere but which does offer the patient a favorable prognosis. In these circumstances hospital stay will be dependent upon the patient's cooperation and he may be dismissed without privilege of readmission if his behaviour warrants it.
4. All prisoners under the custody of the State Department of Corrections will be admitted to the prison ward upon request of that Department, where their medical, nursing, feeding and general care will be the responsibility of the hospital. Their custody and detention, however, are problems of the State Department of Corrections. If their conduct has been good and their cooperation in treatment has been obtained, they shall be eligible for transfer to the regular wards without the necessity of making regular application.
5. Persons with communicable tuberculosis who fail to observe reasonable rules and regulations (placarding of the

home and typewritten instructions are essential parts of this condition) for the protection of the public, are subject to trial and jail sentence upon conviction.

6. No case of tuberculosis can be admitted to the sanatorium, or having been admitted can remain there who is mentally defective, a drug or liquor addict, or who will not comply with the rules and regulations of the sanatorium.
7. Patients who are able without serious hardships to themselves and family are required to pay what they can up to a maximum of \$5.03 per day.
8. Ability to pay will not give an preferential rights, privileges, quarters or services not granted to other patients.
9. *Duration of patient residence at the Sanatorium:* No time limit is imposed. Bringing tuberculosis to a satisfactory state of arrest and the patient to a point where he may resume useful work is a long and tedious process—seldom under a year and usually longer. No patient should leave the sanatorium unless means of continuing the “curing process” elsewhere are provided and carefully planned before his departure. Patients may be discharged at any time when in the opinion of the superintendent further residence at the sanatorium is unnecessary or useless, or undesirable for any other reason. Upon discharging patients, and before discharge if possible, the superintendent of the Sanatorium will be required to immediately notify the responsible county or regional health department of the fact that the patient has left or is to leave the Sanatorium, and include a report on the patient’s clinical status, prognosis, need for further treatment, and exercise tolerance, so that the responsible local or regional health department may determine what its action should be to insure proper supervision and care of the patient and protection of the public.

Adopted by the State Board of Health on November 10, 1949.

Tuberculosis Quarantine Procedure

Under 88-112, Georgia Code of 1933, “it shall be the duty of all local boards of health and the public health and municipal

officers of this State to enforce such quarantine and sanitary rules and regulations as may be adopted by the State Board."

In order to make it possible to bring about the better control of tuberculosis, which is an infectious disease and is reportable by law, the following quarantine rules and regulations were adopted by the State Board of Health, April 15, 1948.

1. Any person suffering from tuberculosis in communicable form who refuses to obey the instructions for the control of tuberculosis given in writing or print by any public health officer, State, County or Municipal, or the rules and regulations of any hospital or sanatorium wherein he or she is a patient, shall be quarantined or isolated under written quarantine order by the health officer or local board of health in such place, premises, quarters or institutions meeting the approval of either the State, County or Municipal department of public health.
2. Any person reasonably suspected of having tuberculosis in a communicable stage or condition shall, promptly upon notice from the State, local, or regional health department, or local boards of health, submit to an examination which shall include sputum examinations by approved methods and a recent chest x-ray picture of good diagnostic quality by a licensed physician of his or her choice or any public health officer, State, County or Municipal, and a diagnosis of communicable tuberculosis shall be reported to the State and local departments of health and shall subject such person to the provisions of paragraph (1) of these rules and regulations. Results of examinations demanded as above are to be reviewed, when deemed necessary, by the Division of Tuberculosis Control, Georgia Department of Public Health, upon demand by any public health officer, and for such review the x-ray picture must be sent to the Division of Tuberculosis Control.
3. Any violation of these rules and regulations shall upon conviction subject the patient to forcible quarantine and the patient will be accepted for care and treatment upon court order to Battey State Hospital, Rome, Georgia.

Under these rules and regulations it is the duty of the health officer responsible to the community for the control of tuberculosis to satisfy himself that proper precautions are being observed by the patient with communicable tuberculosis, that is,

who has positive sputum, to protect other people from tuberculous infection.

If the public health officer finds his instructions being violated, by persons with positive sputum and that the patient is not cooperative, refusing to obey instructions it is the duty of the health officer to put into effect the Communicable Disease Quarantine Order for Tuberculosis as provided in Item 1, above. If this quarantine is violated it is the duty of the health officer to bring the matter to the attention of the local law enforcement officials and upon conviction the recalcitrant patient will be accepted at Battey State Hospital for care and treatment upon court order as provided in Item 3, above. *Needless to say forcible quarantine orders in tuberculosis cases should be resorted to only in those cases which are definitely determined to have communicable tuberculosis and who refuse to cooperate to prevent its dissemination.* A person not provided with the means to properly safeguard others, but otherwise cooperative is not subject to forcible quarantine. He should be provided with such means in his home or community. If not at all possible to do this locally, the cooperative patient may be admitted to Battey State Hospital as a regular patient. (See Battey State Hospital Admission Policies).

Where there is strong reason to suspect that a person has communicable tuberculosis and the suspect refuses proper examination to determine the fact, he may and should be required, through court action if necessary, to undergo an examination satisfactory to the health authorities, State or local. This examination will require chest x-ray study, as well as examination by an approved laboratory of sputum satisfactorily secured.

Adopted by the State Board of Health on April 15, 1948.

Rules and Regulations for the Control of Undulant Fever

WHEREAS, undulant fever (also called Malta fever) has recently been found to exist in man in various sections of Georgia and that this disease is caused by infection with the same bacterial agent known to be the cause of contagious abortion in cattle; and that the State Veterinary Department has demonstrated by the laboratory testing of the blood of thousands of dairy cattle in Georgia during the past three years that con-

tagious abortion is common among dairy cattle in this State, especially those imported from other states, and the evidence at hand justifies the assumption that undulant fever in man is contracted from infected animals, probably through the medium of dairy products; and

WHEREAS, the State Veterinarian is employing the following regulations pertaining to the control and eradication of contagious abortion in cattle in Georgia:

Regulation No. 17.

Paragraph 1. All breeding cattle, including calves six months or more old, shall pass a negative blood test for contagious abortion (agglutination or complement fixation), made by a Federal, State or competent commercial laboratory, not more than three weeks prior to shipment into the State of Georgia.

Paragraph 2. Each animal shall be ear tagged or otherwise permanently marked for identification and the health certificates must show the date of the test and the name of the laboratory making the test. The original report from the testing laboratory must be attached to the copy of the health certificate sent to the State Veterinarian of Georgia, by the veterinarian who issues the health certificate.

Paragraph 3. Cattle moving in violation of these requirements will be quarantined and tested at the owner's expense, and any reactors will be tagged or branded for identification and quarantine upon the owner's premises. Violations of quarantine will be prosecuted and the reacting animal may be ordered returned to point of origin.

BE IT RESOLVED that the State Board of Health strongly endorses these regulations, said endorsement to be given due publicity through the press and official organs for the information of the people of Georgia.

Adopted by the State Board of Health, August 8, 1928.

Venereal Disease Control

88-420, Georgia Code 1933, *Treatment of child to prevent blindness from gonococcus infection*, and 88-421, Georgia Code 1933, *Report of inflammation of eyes of infants*, see page 23 of this bulletin.

88-501, Georgia Code 1933. *Syphilis, gonorrhea and chancroid declared contagious and infectious; unlawful exposure.*—Syphi-

lis, gonorrhea and chancroid, hereinafter designated as venereal diseases, are hereby declared to be contagious, infectious, communicable and dangerous to the public health. It shall be unlawful for any one infected with these diseases, or any of them, to expose another to infection. (Acts 1918, p. 275.)

88-502, Georgia Code 1933. *Report of cases of venereal diseases to health authorities.*—Any physician or other person who makes a diagnosis in or treats a case of venereal disease, and any superintendent or manager of a hospital, dispensary or charitable or penal institution in which there is a case of venereal disease, shall make report of such case to the health authorities, according to such form and manner as the State Board of Health shall direct. (Acts 1918, p. 276; 1931, pp. 7, 11; 1933, p. 7.)

88-503, Georgia Code 1933. *Examination, treatment, and isolation of persons infected.*—State, county and municipal health officers or their authorized deputies within their respective jurisdictions are hereby directed and empowered, when in their judgment it is necessary to protect the public health to make examination of persons infected or suspected of being infected with venereal diseases, to require persons infected with venereal disease to report for treatment to a reputable physician and continue treatment until cured or to submit to treatment provided at public expense, and to isolate persons infected or reasonably suspected of being infected with venereal disease. (Acts 1918, p. 276.)

88-504, Georgia Code 1933. *Treatment of prisoners; hospitals; report to physicians for treatment.*—All persons who shall be confined or imprisoned in any State, county or city prison may be examined and treated for venereal disease by the health authorities or their deputies. The State, county and municipal boards of health shall have authority to take over such portion of any State, county or city prison as may be necessary for a board of health hospital, wherein all persons who shall have been confined or imprisoned and who are suffering with venereal disease at the time of the expiration of their terms of imprisonment shall be isolated and treated at public expense until cured, or in lieu of such isolation, such person may, in the discretion of the Board of Health, be required to report for treatment to a licensed physician or submit to treatment provided

at public expense as provided in section 88-503. (Acts 1918, p. 276; 1931, pp. 7, 11; 1933, p. 7.)

88-505, Georgia Code 1933. *Rules and regulations authorized.*—The State Board of Health is hereby empowered and directed to make such rules and regulations as shall, in its judgment, be necessary for the carrying out of the purposes of this law, including rules and regulations provided for such labor on the part of isolated persons as may be necessary to provide in whole or in part for their subsistence, and to safeguard their general health, and such other rules and regulations concerning venereal diseases as it may from time to time deem advisable. All such rules and regulations so made shall be of force and binding upon all county and municipal health officers and other persons affected by this law. (Acts 1918, p. 277; 1931, pp. 7, 11; 1933, p. 7.) *Note: See Chapter 88-99, Georgia Code 1933, or page 243 of this bulletin, for penalty.*

Rules and Regulations of State Board of Health for Control of Venereal Diseases

Under authority of section 88-505 the State Board of Health has adopted, in addition to the enacted laws, the following rules and regulations:

Rule 1. *Venereal diseases to be reported.*—Any physician or other person who makes a diagnosis in, or treats, a case of syphilis, gonorrhea, or chancroid, and every superintendent or manager of a hospital, dispensary, or charitable or penal institution, in which there is a case of venereal disease, shall report such case immediately in writing to the local health officer, stating the name and address or the office number, age, sex, color, and occupation, of the diseased person, and the date of onset of the disease, and the probable source of the infection, provided, that the name and address of the diseased person need not be stated except as hereinafter specifically required. The report shall be sent to the local health officer, who shall report weekly on the prescribed form to the State Board of Health all cases reported to him. In case there is no local health officer, the report shall be made to the county or city board of health. If there is no organized, active board of health, then the report shall be immediately made direct to the Georgia Department of Public Health, State Capitol, Atlanta, Georgia.

Rule 2. *Patients to be given information.*—It shall be the duty of every physician and of every other person who examines or treats a person having syphilis, gonorrhea, or chancre, to instruct him in measures for preventing the spread of such disease, and inform him of the necessity for treatment until cured, and to hand him a copy of the circular of information obtainable for this purpose from the State Board of Health.

Rule 3. *Investigation of cases.*—All city, county, and other local health officers shall use every available means to ascertain the existence of and to investigate all cases of syphilis, gonorrhea, and chancre within their several territorial jurisdictions, and to ascertain the sources of such infections. Local health officers are hereby empowered and directed to make such examinations of persons reasonably suspected of having syphilis, gonorrhea, or chancre, as may be necessary for carrying out these regulations. Owing to the prevalence of such diseases among prostitutes and persons associated with them, all such persons are to be considered within the above class.

Rule 4. *Protection of others from infection by venereally diseased persons.*—Upon receipt of a report of a case of venereal disease it shall be the duty of the local health officer to institute measures for the protection of other persons from infection by such venereally diseased person.

Local health officers are authorized and directed to quarantine persons who have, or are reasonably suspected of having syphilis, gonorrhea, or chancre, whenever, in the opinion of said local health officer, or the State Board of Health, or its secretary, quarantine is necessary for the protection of the public health. In establishing quarantine the health officer shall designate and define the limits of the area in which the person known to have, or reasonably suspected of having syphilis, gonorrhea or chancre, and his immediate attendant are to be quarantined and no persons other than the attending physician shall enter or leave the area of quarantine without the permission of the local health officer.

Taking Over State and County Prisons

Whenever it is necessary for a place of detention to be provided as stated in Section 4 of the Venereal Disease Act of 1918, notice shall be given by the State Board of Health or a deputy of the State Board of Health, county or municipality,

either verbally or in writing, to the proper official in charge of such prison as mentioned in the Act and section, and they, the keeper, warden, guards or any one in charge is enjoined to give to such person or persons under detention the care and treatment as outlined to them by the Board of Health or its deputies under whose jurisdiction the same may be.

Providing for Labor

The Venereal Disease Law, Section 5, provides that persons confined for treatment shall labor and provide for at least "in part for their subsistence and to safeguard their general health."

The State Board of Health realizes it cannot definitely define rules to cover individual cases, and for this reason hereby confers on its deputies, to-wit: county boards of health, city or municipal boards of health, officers of United States Public Health Service, and all others who have charge of such patients, the authority to pass such rules and regulations as may meet the individual, community or case requirements, providing the same are in conformity to the ability of the individual and the needs for maintaining health and rapid alleviation of venereal disease. The rules so passed should have the approval of the physician in charge.

No one but the local health officer shall terminate said quarantine, and this shall not be done until the diseased person has become non-infectious, as determined by the local health officer or his authorized deputy through clinical examination, and all necessary laboratory tests made by the bacteriologist of the State Board of Health or his deputy. This laboratory shall be and is the only and final place of resort, or until permission has been given him so to do by the State Board of Health or its secretary.

Authorized Deputy

An authorized deputy of the State Board of Health as mentioned in the Venereal Disease Act of 1918 is defined to be and the following are deputies:

All members of the Georgia State Board of Health, local boards of health, both county and municipal, all physicians who are legally appointed by the State Board of Health, county or municipal boards of health, all physicians now acting for and by authority of appointment by the United States Public Health

Service now in the State or who may hereafter be appointed or be assigned to our State, and all others who may be specially appointed by this board. It is prohibited that any deputy appointed under this rule other than a legally licensed physician shall make a physical examination of the body of any person for the diagnosis or treatment of venereal diseases.

The power of removal of deputies shall be in this board without recourse.

Right of Appeal

The right of one held for venereal disease in quarantine in this state to an additional examination to clear up any doubt that might be raised or be made, will be granted when appeal is made to the local board of health. This appeal shall be made in writing by the aggrieved and addressed to the chairman of the local board of health in the county, city, or municipality in which the infected one is being held. When such appeal has been received, the local board of health shall appoint a disinterested physician at the expense of the appellant, or in case the appellant is not able to employ a physician and will so testify, the local board shall request the county physician to act for the aggrieved patient in company with the physician who has the appellant in charge and who made the diagnosis in the case, or when this is not practical, the physician who made the original diagnosis may select some other physician and appoint him as his deputy to go with the physician selected by the board. The physician who has been chosen by the local board shall visit the patient at such time as a fair and impartial examination can be made, not immediately after treatment has been administered, and shall make his own smear for gonorrhea and take his own specimen of blood for Wassermann, taking personal charge of the specimen until he has brought or sent same to the State Board of Health laboratory, making all physical examinations and writing out the clinical symptoms as he finds them, and let them and his diagnosis accompany the specimen sent in. The local health officer shall do the same, taking specimen at the same time. The two physicians shall mark the specimens with the same symbol or name that confusion may not arise. The findings of the laboratory shall be transmitted as quickly as possible to both the physi-

cians and also the prison warden, or the officer in charge of the quarantined one.

The local health officer shall inform all persons who are about to be released from quarantine for venereal disease, in case they are not cured, what further treatment should be taken to complete their cure. Any person not cured before release from quarantine shall be required to sign the following statement after the blank spaces have been filled to the satisfaction of the health officer:

I,....., residing at
....., hereby acknowledge the fact that I am at
this time infected with....., and agree to place myself
under the medical care of.....
(Name of physician or clinic)
.....within.....hours, and that I
(Address)
will remain under treatment of said physician or clinic until released by
the health officer of....., or until my case
is transferred with the approval of said health officer to another regu-
larly licensed physician or an approved clinic.

I hereby agree to report to the health officer within four days after beginning treatment as above agreed, and will bring with me a statement from the above physician or clinic of the medical treatment applied in my case, and thereafter will report as often as may be demanded of me by the health officer.

I agree, further, that I will take all precautions recommended by the health officer to prevent the spread of the above disease to other persons, and that I will not perform any act which would expose other persons to the above disease.

I agree, until finally released by the health officer, to notify him of any change of address and to obtain his consent before moving my abode outside his jurisdiction.

.....
Signature

.....
Date

All persons signing the above agreement shall observe its provisions, and any failure to do so shall be a violation of these

regulations. All such agreements shall be filed with the health officer and kept inaccessible to the public as provided in Rule 10.

This is to certify that.....has this day been discharged from quarantine, ill of venereal disease, not cured, but sufficiently improved as not to be dangerous to the public health so long as the instructions given the patient are obeyed. Should these instructions be disobeyed, the patient agrees to return to quarantine without resistance or any formality being taken, this liberty being allowed as a period of probation.

(Signed)M. D.

Form to be Used for Release From Quarantine

Rule 5. *Conditions under which the name of a patient is required to be reported.*—(a) When a person applies to a physician or other person for the diagnosis or treatment of syphilis, gonorrhea, or chancroid, it shall be the duty of the physician or person so consulted to inquire of and ascertain from the person seeking such diagnosis or treatment whether such person has theretofore consulted with or has been treated by any other physician or person and, if so, to ascertain the name and address of the physician or person last consulted. It shall be the duty of the applicant for diagnosis or treatment to furnish this information, and a refusal to do so or a falsification of the name and address of such physician or person consulted by such applicant shall be deemed a violation of these regulations. It shall be the duty of the physician or other person whom the applicant consults to notify the physician or other person last consulted of the change of advisers. Should the physician or person previously consulted fail to receive such notice within 10 days after the last date upon which the patient was instructed by him to appear, it shall be the duty of such physician or person to report to the local health officer the name and address of such venereally diseased person.

(b) If an attending physician or other person knows or has good reason to suspect that a person having syphilis, gonorrhea, or chancroid is so conducting himself or herself as to expose other persons to infection, or is about so to conduct himself or herself, he shall notify the local health officer of the name and

address of the diseased person and the essential facts in the case.

Rule 6. *Druggists forbidden to prescribe for venereal diseases.*—No druggist or other person not a physician licensed under the laws of the State shall prescribe or recommend to any person any drugs, medicines, or other substances to be used for the cure or alleviation of gonorrhea, syphilis, or chancreoid, or shall compound any drugs or medicines for said purpose from any written formula or order not written for the person for whom the drugs or medicines are compounded and not signed by a physician licensed under the laws of the State.

Rule 7. *Spread of venereal disease unlawful.*—It shall be a violation of these regulations for any infected person knowingly to expose another person to infection with any of the said venereal diseases or for any person to perform an act which exposes another person to infection with venereal disease.

Rule 8. *Prostitution to be repressed.*—Prostitution is hereby declared to be a prolific source of syphilis, gonorrhea, and chancreoid, and the repression of prostitution is declared to be a public health measure. All local and State health officers are therefore directed to cooperate with the proper officials whose duty it is to enforce laws directed against prostitution and otherwise to use every proper means for the repression of prostitution.

Rule 9. *Giving certificates of freedom from venereal diseases prohibited.*—Physicians, health officers, and all other persons are prohibited from issuing certificates of freedom from venereal disease, provided this rule shall not prevent the issuance of necessary statements of freedom from infectious diseases written in such form or given under such safeguards that their use in solicitation for sexual intercourse would be impossible.

Rule 10. *Records to be secret.*—All information and reports concerning persons infected with venereal diseases shall be inaccessible to the public except in so far as publicity may attend the performance of the duties imposed by these regulations and by the laws of the State.

Rule 11. *Violation to advertise.*—It shall be a violation for one to advertise by posting, writing, printing, displaying or giv-

ing in any manner, publicity to the sale in papers, magazines, periodicals, public places, show windows, or in toilets, privies or places used for urinals or any other place or manner any remedy or device for the supposed cure or alleviation of either or of all venereal diseases.

Adopted by the State Board of Health January 14, 1919, and amended March 16, 1938.

Regulations for Distribution of Free Drugs for Venereal Disease

I. Free drugs for venereal disease will be distributed to clinics and to private physicians for the treatment of individuals.

II. To obtain free drugs, the physician must report the case and sign the order, giving the patient's name, address, age, color, sex, and marital status, and stating whether in the infectious stage or not. In the counties having a full-time health department these reports are to be sent to the county commissioner of health. The commissioner of health shall send a copy to the State Department of Public Health. The county commissioner of health shall keep on hand a reasonable supply of drugs furnished by the State Department of Public Health, and he shall supply the physician and clinics in his county with these drugs in accordance with the plan outlined below. In cities operating full-time health departments separate from the county, the city health officer shall receive the reports and dispense the drugs. In counties and cities not having full-time health departments, reports are to be sent to and drugs obtained from the State Department of Public Health, Atlanta, in accordance with the plan outlined below.

III. When the required report of a case as outlined above has been received by the department of health, a supply of arsenicals and bismuth will be forwarded. The initial shipment will consist of ten doses of arsenical and a supply of bismuth (if requested). When the patient has received the ten doses of arsenical and ten doses of bismuth, the physician must request another supply of drugs, stating the progress of the case and whether or not the patient is cooperating. The supply of

drugs will be sent on receipt of this information. Additional drugs may be received in a like manner.

IV. The physician requesting free drugs should if possible get the history of all contacts of infectious cases and urge such contacts to be examined, or report them to the proper authorities for follow-up and quarantine, if necessary.

V. In the event any patient receiving free drugs as provided herein should stop treatment before completing the prescribed course, the physician should report such delinquent to the county board of health, or if there is no active board, to the State Department of Public Health, Atlanta, Georgia. In case a patient stops treatment and moves from this State to another or from one county to another, this individual should be reported as a delinquent unless the patient secures a permit of transfer from the physician in charge of his case to another physician or clinic. Notification of such transfer or change of address should be given the department of health.

VI. Local expenditures of the clinics shall not be replaced or curtailed by their receiving free drugs for the treatment of venereal disease provided by the State, but the local funds now being spent shall be expended to increase the efficiency of the services rendered by the clinics and to provide follow-up of infectious and delinquent cases.

VII. The minimal clinic requirements for obtaining drugs will be:

- (1) A physician licensed to practice medicine in the State of Georgia must have charge of each clinic.

- (2) The clinic must be located so as to have adequate space for the segregation of races, and of sex if possible.

- (3) The clinic must be equipped with running water, sterilizer, and adequate supply of needles and syringes for the various drugs used.

- (4) The clinic must have the necessary equipment for testing the urine for albumin by one of the recognized tests.

- (5) The patient must be referred to the clinic, in writing, by a physician.

- (6) The standard treatment record card furnished by the

Georgia Department of Public Health must be completely filled out, giving complete history of the patient's condition and indicating whether infectious or non-infectious.

(7) All delinquent cases that are infectious or early cases must be followed up and required to continue treatment.

(8) Follow-up and examination of all contacts made by these infectious cases must be required.

(9) Before the 5th of each month the clinic must submit to the State Department of Public Health a monthly report of the activities for the preceding month.

VIII. All rules and regulations appertaining to the venereal diseases, adopted by the State Board of Health, is the law of Georgia and consequently applies to all physicians and boards of health.

Adopted by the State Board of Health, September 28, 1938.

Declaration by the Georgia State Board of Health of a Quarantine and Promulgation of Rules for Its Enforcement

WHEREAS, There is now prevalent in the State of Georgia an epidemic of venereal diseases, of such proportions and wide-spread nature that it is a menace to the public health and safety, and is a threat and deterrent to an all-out war effort, in that many men and women, both in the armed forces and engaged in defense work, are afflicted with these diseases, or exposed to their infection or contagion; and

WHEREAS, The Federal Congress, by annual appropriations, has provided funds to aid the States, counties, health districts and other political subdivisions in establishing and maintaining measures for the prevention, treatment and control of venereal diseases, and

WHEREAS, The State Board of Health is vested by law with supreme authority in matters of quarantine, and the power to declare and enforce quarantine rules and regulations; and

WHEREAS, syphilis, gonorrhea and chancroid have been declared, as matter of law, to be contagious, infectious and com-

municable and dangerous to the public health, and such diseases are, as a matter of fact, contagious, infectious and communicable;

NOW THEREFORE, in view of the foregoing, the State Board of Health does hereby declare a quarantine upon all persons suffering with any venereal disease, as well as all persons who have been directly exposed to the same. The boundaries of this quarantine shall coincide with the State of Georgia and it shall be enforced according to the following rules and regulations which are hereby promulgated and put in force by the State Board of Health:

Rule 1. *Venerally diseased persons entering State.* Every person coming into this State while having or being infected with any venereal disease, whether in a contagious or non-contagious state or condition, shall, within twenty-four hours after his arrival in this State, report to a licensed physician for treatment. If such person shall have previously been under the treatment of a licensed physician of another State or territory of the United States, or foreign country, he or she shall present to the physician in this State to whom he or she reports for treatment, a statement from the physician under whose care he or she formerly was, showing the treatments given and whether such disease is still in a contagious state or condition. Should any such person fail to report for treatment or fail to present the statement from his former physician, he or she shall, upon being found in this State, be immediately quarantined and examined by the authorized authorities, and if the venereal disease with which such person is suffering is in a contagious state, then such person shall be sent to an isolation post or hospital designated by the State Board of Health.

Rule 2. *Duty of physicians to report.* It shall be the duty of every licensed physician in this State who shall diagnose any person as having any venereal disease in this State to immediately report such fact and the name and address of such person to the State Board of Health. If such person is one who is a prostitute, or one who has no visible means of support, or one who is unable to pay for or arrange for the treatment of such disease by a private physician until cured or made non-contagious, then the State Board of Health, through its authorized agents or employees, shall take custody of such person and

transport him or her to an isolation post or hospital as designated in the manner provided in this regulation, and treatment shall be administered to such person at public expense.

Rule 3. *Duty of detention officers to report.* Any arresting officer, warden or jailer of this State who shall arrest or have in his custody any person reasonably suspected of having any venereal disease, or any prostitute, shall immediately report the name and place of detention of such person to the State Board of Health. Any duly authorized agent of the State Board of Health, or district, or county or municipal board of health or county physician or municipal physician shall, with the consent of the authorized physician, if any, in charge of the place of detention of such person, have the right to have such person examined to determine if he or she is suffering with any venereal disease. If any such person shall be found to have any venereal disease in a stage or condition which is contagious or unsafe for the public health and without provision for immediate treatment therefor by a licensed physician, upon his or her release from such arrest or custody, such person shall immediately and forthwith be delivered to a duly authorized agent of the State Board of Health, or county or city board of health, who is authorized and directed to transport such person (after he or she shall have served any sentence imposed upon such person for the offense or crime for which he or she was arrested) to an isolation post or hospital designated for the treatment of such venereal cases by the State Board of Health.

Rule 4. *Isolation and quarantine under certain conditions.* When any public health officer, State, county or municipal, shall diagnose any person as being infected with a venereal disease in a contagious state, and such person so infected is not then under treatment therefor by a licensed physician, or such person so infected does not have or cannot obtain means with which to provide for his or her own treatment, such public health officer shall immediately report to the State Board of Health the name and address of such person, and the State Board of Health shall designate some agent or employee of the State, county or municipal government to transport such person to some designated isolation post or hospital for treatment. The designation or establishment by the State Board of Health of isolation posts or hospitals for detention and/or

treatment of venereal cases shall be with the concurrence of the ordinary or county commissioners in charge of county property in which such isolation post or hospital is located, provided, however, the State Board of Health may also designate any Federal isolation post, detention hospital or hospital in this State authorized to accept venereal cases for quarantine and treatment of venereal cases under this regulation when such Federal facility shall consent to accept such designation.

Rule 5. *Transportation provided for.* Transportation of persons provided for in this regulation to an isolation post or hospital for detention and/or treatment of venereal diseases shall be arranged and provided by the State Board of Health.

Rule 6. *Conditions of release from quarantine.* All persons who shall be placed in an isolation post or hospital for the treatment of venereal diseases as provided in this regulation shall remain at such place until the licensed physician in charge or other licensed physician under him shall have diagnosed such case as safe for release from such isolation post or hospital. Such person shall submit to all treatments required in order to make such diseases non-contagious or to cure the same.

Rule 7. *Visits to isolated persons restricted.* No person of the opposite sex, other than the wife, father or mother of any such person, may visit a person in an isolation post or hospital provided for the detention and/or treatments of venereal diseases as specified in this regulation while such patient is suffering with a venereal disease in a contagious stage, and such wife, mother or father of the person so isolated may only visit such a patient with the written permission of the licensed physician or officer or employee of the State Board of Health in charge of such isolation. All such visits must be during daylight and shall last for only such time and under such conditions as the person in charge of the isolation post shall grant.

Rule 8. *Detention and transportation by authorized persons.* For the purpose of enforcing this regulation, all officers, agents and employees of any duly established board of health, whether it be a State, county, municipal, district or other political subdivision board of health, shall have the power to detain any person having or being infected with a venereal disease in a contagious state who is not then being provided with medical treatment therefor, or who does not have the means with which

to provide such care; and all such officers, agents or employees are likewise authorized to transport such persons to and from such isolation post as the State Board of Health shall designate.

Rule 9. *Name and location of places of detention to be announced.* The State Board of Health shall from time to time, announce the name and location of each isolation post, detention hospital or hospital designated, or established or maintained for the detention and/or treatment of persons who are subject to the provisions of this regulation.

Rule 10. *Penalty.* Any person who shall violate any of the provisions of this regulation shall be guilty of a misdemeanor and shall, upon conviction, be punished as for a misdemeanor.

Rule 11. *Transportation from place of detention.* The State Board of Health shall, as to persons who are detained and treated under the provisions of this regulation and who are indigent, after such person is cured of such venereal disease or after the same is rendered non-contagious by treatment and it is safe to turn him or her back upon society, provide for the transportation of such person from the place of detention to the place where he or she was arrested, or to any other place within this State where said person shall desire to return.

Adopted by the State Board of Health October 15, 1942, and amended March 18, 1943.

Cooperation in Venereal Disease Control House Resolution No. 42

GEORGIA LAWS 1943.

Whereas, The Citizens of the State of Georgia are vitally interested in doing everything within their power to prevent the spread of venereal diseases in this State and to reduce said diseases to a minimum, and

Whereas, It is a well-known fact that at the present time such diseases are advancing at an alarming rate and are apparently not being checked effectively, and,

Whereas, The medical officers of the United States Army and Navy have reported that prostitution in areas around army camps in this State is flourishing and that as a result

the men of our armed forces are becoming infected with these diseases at an increased rate;

Now, therefore, be it Resolved by the House of Representatives, the Senate concurring, that all citizens of this State co-operate whole-heartedly with the law enforcement officers and the judiciary in a determined effort to control this situation and thereby reduce the spread of venereal diseases in this State.

Be it further Resolved that our law enforcement officers and the courts of this State cooperate with the medical authorities in planning a program designed to abate the spread of these diseases and to reduce same to a minimum.

Be it further Resolved that the courts of this State, in dealing with prostitutes and persons infected with these diseases cooperate with the medical authorities to the end that the spread of these diseases may be stopped and prostitution discouraged.

Be it further Resolved that all law enforcement agencies of this State and all courts having jurisdiction of these matters shall give particular attention to cases involving juveniles, and their juvenile delinquents be segregated from the professional prostitutes and that said juveniles not be handled through the customary procedure covering the disposition of cases involving the professional prostitutes. (Acts 1943, pp. 1678, 1679.)

Syphilis—Blood Test During Pregnancy Required.

GEORGIA LAWS 1943.

Section 1. *Blood specimen.*—That every woman who becomes pregnant shall have a blood specimen taken for submission to an approved laboratory for a standard serologic test for syphilis.

Section 2. *Attending physician's duty.*—That any licensed physician, attending or giving prenatal care to a pregnant woman in this State, shall take or cause to be taken a specimen of blood of each woman so attended within thirty (30) days from the date of the first examination for submission to an approved laboratory for a standard serologic test for syphilis. In case such pregnant woman is in a state of labor at the first exami-

nation which may make it inadvisable to obtain a blood specimen, then the specimen shall be obtained within ten (10) days after delivery. Provided no doctor or person taking such test shall charge more than one dollar therefor.

Midwives. Each other person in the State who is permitted by law to attend pregnant women, but not permitted by law to obtain blood specimens, shall cause such a specimen of blood to be taken within thirty (30) days from the date of the first examination of each woman so attended, by a qualified and licensed physician, for submission to an approved laboratory for a standard serologic test for syphilis.

Section 3. *Standard serologic test.*—For the purpose of this act a standard serologic test shall be a test for syphilis approved by the Georgia Department of Public Health, and an approved laboratory shall be any laboratory approved by the Georgia Department of Public Health.

Section 4. *Charity cases.*—That any woman who is pregnant and who is unable to pay a licensed physician to take a blood test, as required by this Act, may have such a blood specimen taken by the local health department or the county physician for submission to an approved laboratory for a standard serologic test for syphilis.

Section 5. *Birth certificate to show test.*—That physician, and other persons permitted by law to attend pregnant women and who are required to report births and still-births, shall state on the birth certificate whether a blood test for syphilis, as required by this Act, had been made on the woman who bore the child for which a birth certificate is filed, and shall state the approximate date of such test, provided that no birth certificate shall show result of test. If no such blood test was made, reasons for failure to make test shall be stated.

Section 6. *Violation a misdemeanor.*—That any licensed physician, attending midwife, county health officer, county physician, or the pregnant woman herself, or any other person who knowingly and wilfully violates this Act, or any part thereof, shall be guilty of a misdemeanor, and, upon conviction thereof, shall be punished as for a misdemeanor. (Acts 1943, pp. 599-601.)

Prostitutes and Prostitution.

GEORGIA LAWS 1943.

Section 1. *Acts prohibited; Punishment for violation.*—That any person who shall receive or offer or agree to receive another into any house, place, building, tourist camp, or other structure, or vehicle, trailer, or other conveyance for the purpose of prostitution or assignation, or to permit any person to remain there for such purpose; or who shall knowingly own any place, house, tourist camp, other structure, or part thereof, or trailer or other conveyance used for the purpose of prostitution or assignation, or who shall let, sublet, or rent any such place, premises, or conveyance to another with knowledge or good reason to know of the intention of the leasee or rentee to use such place, premises, or conveyance for prostitution, or who shall engage in prostitution or assignation; or who shall reside in, enter, or remain in any house, place, building, tourist camp, or other structure, or enter or remain in any vehicle, trailer, or other conveyance for the purpose of prostitution or assignation; or who shall aid, abet, or participate in the doing of any of the acts herein prohibited, shall, upon conviction for the first offense and/or second offense under this Act, be punished as for a misdemeanor and upon conviction for any subsequent offense under this Act shall be punished as for a felony and by imprisonment for not less than one year nor more than three years.

Section 2. *Acts prohibited; Punishment for violation.*—That any person who shall cause, induce, persuade, encourage, or procure by promise, threat, violence, or by any scheme or device, a female to become a prostitute or to become or remain an inmate of a house of prostitution; or who shall induce, persuade, or encourage a female to come into or leave this State for the purpose of prostitution, or to become an inmate in a house of prostitution; or who shall receive or give, or agree to receive or give any money or thing of value for procuring, or attempting to procure any female to become a prostitute or an inmate for a house of prostitution; or who shall knowingly accept, receive, levy, or appropriate any money or other thing of value without consideration from a prostitute or from the proceeds of any woman engaged in prostitution; or who shall aid, abet, or participate in the doing of any acts herein pro-

hibited, shall, upon conviction for the first offense under this Act, be punished as for a misdemeanor and upon conviction for any subsequent offense under this Act shall be punished as for a felony by imprisonment in the penitentiary for a period of not less than one year nor more than three years.

Section 3. *Terms defined.*—That all leases and agreements, for letting, subletting, or renting any house, place, building, tourist camp, or other structure, for the purpose of prostitution or assignation, shall be void. The term “tourist camp” shall be construed to include any temporary or permanent building, tents, cabins, or structures, or trailers, or other vehicles which are maintained, offered, or used for dwelling or sleeping quarters for pay. The term “prostitution” as used in this Act shall be construed to include the offering or giving of the body for sexual intercourse, sex perversion, obscenity and/or lewdness for hire. That the term “assignation” shall be construed to include the making of any appointment or engagement for prostitution or any act in furtherance of such appointment or engagement.

Section 4. *Reputation as evidence.*—That in the trial of any person, charged with a violation of any of the provisions of this Act, testimony concerning the reputation or character of any house, place, building, tourist camp, or other structure, and of the person or persons who reside in or frequent same, and of the defendant or defendants, shall be admissible in evidence in support of a charge under this Act. (Acts 1943. pp. 568-571.)

Marriage Licenses—Examination for Syphilis.

GEORGIA LAWS 1949.

Section 1. That each and every person both male and female, on whose behalf application for a marriage license is made, must present to the ordinary, who shall file same, a certificate signed by a qualified physician, licensed to practice medicine and surgery in any State or United States territory, stating that the applicant for a marriage license has been given an examination, including a standard serologic test for syphilis, and that, in the opinion of such examining physician, the applicant is not infected with syphilis, or if so infected, is

not in a stage of that disease which is or may become communicable.

The certificate shall be accompanied by a statement from the person in charge of an approved laboratory making the test, or from some other person, authorized to make such reports, setting forth the name of the test, the date it was made, the name and address of the physician to whom the test was sent and the name and address of the person whose blood was tested.

The physician's examination, including a standard serologic test for syphilis of both the man and woman applying for a marriage license shall be made within thirty (30) days prior to the application for such license.

If applicant is unable to pay for such examination, certificate without charge may be obtained from the local health officer or county physician.

Section 2. For the purpose of this Act a standard serologic test shall be a test for syphilis approved by the Georgia Department of Public Health, and an approved laboratory shall be a laboratory approved by the Georgia Department of Public Health. Provided, that, any other State department of public health, United States Public Health Service, United States Army or Navy laboratory or laboratory approved by these agencies shall be considered approved for the purpose of this act.

The certificate of a physician and the statement from a person in charge of an approved laboratory or from a person authorized to make reports for such laboratory shall be on a form to be provided and distributed by the Georgia Department of Public Health.

Section 3. Exceptions to the above section are permissible only when marriage would confer legitimacy upon an unborn child or when syphilis, though present, has been rendered non-communicable as hereinafter set forth.

(a) When the female on whose behalf application for a marriage license is made presents an affidavit by a physician to the effect that she is pregnant, the ordinary of the county where the application for marriage is made is hereby empow-

ered and authorized to issue a license even though one or both parties to the marriage contract have syphilis in a communicable stage, provided both parties are made aware of the case and further provided such applicant or applicants also sign an agreement to immediately begin and continue such treatment for the infection until cured or released for a period of observation.

(b) When the medical history and physical examination of an applicant shows syphilis to be present, or when the laboratory test for syphilis is positive, and provided both applicants are made aware that a syphilitic infection is present, a certificate may be issued and marriage license granted to the applicant with syphilis who has been treated by such methods and under such treatment and for such period as approved by the Georgia Department of Public Health, and provided such applicant signs an agreement to continue such treatment until cured or released for a period of observation.

Section 4. That when an applicant has been refused a license to marry by reasons of the provisions of this Act, such applicant, within 60 days after said refusal, shall have the right to appeal to the superior court in the county wherein the applicant resides. The superior court judge is hereby empowered to hear an applicant's appeal in a summary way at any place in his judicial district, either in or out of regular court term and without the intervention of a jury. The aggrieved party shall submit to the court the laboratory examination reports that are material to the hearing of said appeal. If after hearing expert medical testimony in the opinion of the court the applicant is free of syphilis or is not in a stage of such disease which may become communicable, the court shall order the licensing authority to issue a license to said person to marry, provided all other requirements of the law regulating the issuance of marriage licenses are complied with.

A certified copy of the court's order shall be filed with the licensing authority issuing the license to marry and shall be accepted in lieu of any and all other certificates required under the provisions of this Act.

Section 5. That every person who is a resident of this State, who leaves this State, is married outside of Georgia, and returns within sixty days shall within sixty (60) days after he

or she returns to this State, file with the ordinary of the county in which he or she lives, a certificate showing that he or she has conformed with the provisions of this Act.

Section 6. That any ordinary who shall issue a marriage license to any person, male or female, who fails to present and file a certificate, as required by this Act, and any applicant for a marriage license or physician who shall knowingly and wilfully make any false statement in any certificate given by such physician under this Act, or any person who shall violate any of the provisions of this Act, shall be guilty of a misdemeanor and, upon conviction thereof, shall be punished as for a misdemeanor.

Section 7. *Severability.*

Section 8. That this Act shall become effective and in force six months from the date of its passage and approval. (February 25, 1949.)

Section 9. Persons found to be infected with syphilis, as a result of the premarital examination provided for in this Act, shall be subject to provisions of Code Sections 88-501, 502, 503, 505, and 88-9916. (Acts 1949, pp. 1054-1057.)

Birth Certificate—Delayed.

GEORGIA LAWS 1943.

Section 1. *The Petition:* Any person desirous of establishing the time and place of his or her birth and of securing the issuance of a birth certificate, where such person was born prior to the year 1919 or where a registration of such person's birth is not on file with the State Department of Public Health, may present a petition to the Superior Court or to the Court of Ordinary of the County of such person's residence or birth. The petition shall be on a form to be prescribed by and shall contain such information as may be required by the State Department of Public Health under the rules and regulations which may be promulgated from time to time by the State Department of Public Health.

Section 2. *Residence of Applicant*: The applicant, if born outside the State of Georgia, must have been a bona fide resident of the State of Georgia for at least 36 months prior to the filing of the petition herein provided for, and this act shall be proved by an affidavit from two freeholders in the county of the applicant's residence, or if the applicant has not been a resident of the State of Georgia for at least six months he must present an affidavit from a bona fide resident of Georgia, stating that applicant's services are needed in a war activity in the State of Georgia.

Section 3. *Filing of Affidavit*: Repealed by Act of Legislature, Georgia Laws 1949, pp. 384-385.

Section 4. *Hearing; Evidence; Judgment*: The petition to establish the time and place of the applicant's birth and to secure the issuance of a birth certificate may be had at any time, either in term or vacation, by the court to which such petition is made. Upon the hearing the applicant shall submit such evidence as may be, from time to time prescribed by the rules and regulations of the State Department of Public Health. The hearing shall be had as promptly as possible after the filing of the petition. The Judge of the Superior Court, Ordinary, or other person authorized by the Ordinary, shall pass upon all issues of fact and law, unless a jury trial shall be demanded by the applicant or by any contestant of the applicant's petition. If a jury trial is requested, the Judge of the Superior Court, Ordinary, or other person as the case may be, shall cause the matter to be referred to a jury at the term of court which may be then in session, or at the next term of the court. Upon the termination of the hearing, whether before a jury, before a Judge of the Superior Court, before an Ordinary, or before some other person authorized to act under the terms of this Act, the officer holding such hearing shall make and enter a judgment as to the status of the applicant, as to the time and place of the applicant's birth, and such other matters as may be prayed by the applicant or as may be required by the rules and regulations of the State Department of Public Health.

Section 5. *Delegation of Authority by Ordinary*: Any Ordinary of this State may delegate his duties and authority, under the terms of this Act, to any lawful deputy of such Ordinary or to any such person as the Ordinary may designate, and depu-

tize, after such person has first been approved by the State Department of Public Health. Any such person to whom such authority is delegated by the Ordinary may act as fully and completely hereunder as the Ordinary himself might act, and the findings and rulings of such persons shall have the same force and effect as if such findings and rulings had been made by the Ordinary, as herein provided.

Section 6. *Record; Fee.* When a judgment is issued under the terms of this Act, determining the time and place of the applicant's birth, a copy of such judgment shall be filed in the office of the Ordinary of the County in which such judgment is rendered, and the Ordinary shall keep an indexed record to be known as Birth Certificate Record, and shall enter thereon the proper index of such judgment. A certified copy of such judgment shall be transmitted by the Court issuing the same to the State Department of Public Health, and shall be filed as a permanent record with the Bureau of Vital Statistics with the same force and effect as a certificate of birth from a local registrar under the provisions of existing law. A filing fee of fifty cents shall be transmitted with each such certified copy to the State Department of Public Health as a filing fee to be used by the Georgia State Department of Public Health in the administration of this act.

Section 7. *Examination fee.* The applicant shall pay, upon the filing of the petition herein provided for, when such petition is filed to the Ordinary or other person delegated by the Ordinary, an examination fee of Two Dollars (\$2.00), and the filing fee of fifty cents to be paid to the State Department of Public Health, or a total cost of Two and 50/100 Dollars (\$2.50). The applicant shall pay to the Ordinary or to the State Department of Public Health, as the case may be, an additional fee of fifty cents for each certified copy of the judgment desired by the applicant. Where the petition is filed to the Superior Court the cost of such proceeding shall be charged to and paid by the petitioner as other costs in the Superior Court are assessed, which costs shall include the fee and fifty cents for filing with the State Department of Public Health. (Acts 1943, pp. 424-428.)

Birth Certificate—Short Form Certification.

GEORGIA LAWS 1943.

Section 1. *Certified copies, contents.*—The State Board of Health and all other officials authorized to issue certified copies of birth certificates, in furnishing information of birth registrations on file in its offices, shall, unless a certified copy containing more complete information is requested, be authorized to certify only the following items, to-wit: Name of Child. Date of birth. Place of birth. Color and sex.

Section 2. *Complete information.*—Certified copies of birth records containing complete information thereof shall only be issued by the State Board of Health or other officials authorized to issue certified copies of birth records, when requested to do so by any of the following:

1. The person whose record of birth is registered, if of age.
2. Either parent of the person whose record of birth is registered.
3. The legal representative of the person whose record of birth is registered.
4. Order of any Court of Record.
5. Any governmental agency, State or Federal, provided such certificate shall be supplied without cost to the State. (Acts 1943, pp. 428, 429.)

State Board of Health—Vital Statistics.

GEORGIA LAWS 1945.

Section 1. The object and purpose of this Act is to make and provide a complete and comprehensive Vital Statistics Law for the State of Georgia and to repeal all laws or parts of laws in conflict herewith; to expressly repeal Chapter 88-11 and 88-12 of the Code of Georgia, the same pertaining to "Vital Statistics"; to expressly repeal an Act entitled "Adopted Children—Birth Certificates" approved March 20, 1943; to expressly repeal subsection 2 of Section 14 of an Act approved March 27, 1941 (Ga. L. 1941, pp. 300-310); to repeal any law or laws in conflict with this Act.

Section 2. *Definitions.* As used in this Act:

(1) "Vital Statistics" includes the registration, preparation, transcription, collection, compilation, and preservation of data pertaining to births, adoptions, legitimations, deaths, stillbirths, marital status, and data incidental thereto.

(2) "Live Birth" means the birth of a child who shows evidence of life after the child is entirely outside the mother.

(3) "Stillbirth" means a birth after twenty weeks' gestation which is not a live birth.

(4) "Dead body" means lifeless human body or such parts of the human body or the bones thereof from the state of which it reasonably may be concluded that death recently occurred.

(5) "Person in charge of interment" means any person who places or causes to be placed a stillborn child or dead body in a grave, vault, or other receptacle or otherwise disposes thereof.

(6) "Physician" means a person legally authorized to practice medicine in this State.

(7) "Board" means State Board of Health.

(8) "Department" means Department of Public Health.

(9) "Director" means Director of the Department of Public Health.

Section 3. *Duties of the State Board of Health.* The State Board of Health shall:

(1) Establish a Division of Vital Statistics with suitable offices properly equipped for the preservation of its official records.

(2) Install a state-wide system of vital statistics.

(3) Make and may amend necessary regulations, giving instructions and prescribe forms for collecting, transcribing, compiling, and preserving vital statistics.

(4) Enforce this Act and the regulations made pursuant thereto.

Section 4. The regulations of the Board shall take effect after passage and approval by the Board.

Section 5. *Registration Districts.* The Board shall divide the State from time to time into registration districts which shall conform to political subdivisions, or combinations thereof, or of parts thereof. Any city with an organized Health Department shall be considered a political subdivision for the purposes of registration of vital statistics.

Section 6. *Local Registrars and Deputies.* The Director shall appoint registrars. A local registrar shall be Justice of the Peace, or Ex-officio Justice, or any person selected by the Director. A local registrar, subject to approval of the Director, shall appoint a deputy or deputies. The local registrar shall immediately report to the Department violations of this Act or the regulations of the Board.

Section 7. The local registrar or his deputy shall not issue certified copies of any vital statistics records in his possession. All such records shall be deemed to be the property of the Georgia Department of Public Health.

Section 8. *Compulsory Registration of Births.* Within the time prescribed by the Board, a certificate of every birth shall be filed with the local registrar of the district in which the birth occurred; such certificate shall be filed by the father, or if the father is not available, by the mother, and, in the absence of both, by the next of kin or the person having custody of the child. A confidential medical report of each birth shall be made upon a form which shall be prescribed by the State Board of Health, which report shall be filed by the physician, midwife, or other legally authorized person in attendance at the birth, with the State Department of Public Health, which report shall be used for statistical and public health purposes only.

Section 9. *Supplemental Report of Name.* In the event the child has not been named at the time the certificate is filed, the local registrar shall deliver to the parents a blank for the supplemental report of the given name of the child, which shall be filled out and returned to the local registrar as soon as the child shall have been named and shall be forwarded to the State Department of Public Health with his regular report.

Section 10. *Adoptions.* In case of adoption of a person born in the State of Georgia it shall be the duty of the clerk of the superior court to forward by the fifteenth of the following month a certified copy of the adoption proceedings to the Di-

vision of Vital Statistics of the Georgia Department of Public Health. The Division upon receipt of the certified copy of the adoption proceedings and upon request of the adopting parents shall prepare a substitute certificate on a form prescribed by the State Board of Health in the name of the adopted person, naming the true date and place of birth and sex of said adopted person and statistical particulars and names of the foster parents in place of natural parents. The Division shall make a substitute birth certificate if furnished with a certified copy of the order of adoption for any birth certificate in its custody. If no birth certificate is found to be on file for the adopted person and if such person was born in the State of Georgia, a delayed birth certificate shall be executed according to the provisions of Section 23. The Division of Vital Statistics shall send a copy of the substitute record to the official responsible for the maintenance of county and/or city vital statistics records as the Board may direct, and such official shall substitute said substitute record for the certificate on file in his office. The copies of the original county birth record shall then be forwarded to the Division of Vital Statistics to be sealed with the original record in the files of the Division of Vital Statistics. Such sealed records may be opened by the Division of Vital Statistics only upon demand of the adopted person, if of age, or by order of a court of competent jurisdiction. Upon receipt of a certified copy of a court order of annulment of adoption, the Division of Vital Statistics shall restore the original certificate to its original place in the files.

Section 11. *Birth Certificate of Illegitimate Child.* If the child is illegitimate, the name of the putative father shall not be entered without his consent in writing.

Section 12. *Amendment of certificates.* No certificate accepted for filing by the Department shall be altered in any manner nor shall any certificate be amended except by order of the Court of Ordinary of the county of birth or residence of the child. The Board shall provide the forms and prescribe by regulation the minimum evidence requirements for amending such certificates. The Ordinary shall receive a fee of \$1 for this order to be paid by the applicant.

Section 13. *Registration of Foundlings—Foundling Report.* Whoever assumes the custody of a foundling child of unknown

parentage shall file immediately with the local registrar of the district a certificate upon a form to be prescribed by the Board, which certificate shall be acceptable for all purposes in lieu of a birth certificate. If the child is identified and a regular birth certificate is found or obtained, the foundling certificate shall be sealed and filed and may be opened only upon court order.

Section 14. *Registration of Deaths and Stillbirths.* The person in charge of interment shall be responsible for obtaining and filing, within the time prescribed by the Board with the local registrar of the district within which the death or stillbirth occurred or the body was found, a certificate of death or stillbirth, upon a form to be prescribed by the Board.

Section 15. *Compulsory Registration of Deaths and Stillbirths.* A certificate of every death or stillbirth shall be filed with the local registrar of the registration district within which the death or stillbirth occurred, within the time prescribed by the Board, or, if the place of death or stillbirth is unknown, then with the local registrar of the district in which the body is found.

Section 16. *Death Certificates.*

(1) The person in charge of interment shall file, with the local registrar of the district in which the death occurred or the body was found, a certificate of death within the time prescribed by the Board.

(2) In preparing a certificate of death, the person in charge of interment shall obtain and enter on the certificate the personal data required by the Board from the persons best qualified to supply them. He shall present the certificate of death to the physician last in attendance upon the deceased or to the coroner having jurisdiction who shall thereupon certify the cause of death according to his best knowledge and belief.

(3) Thereupon the person in charge of interment shall notify the appropriate local registrar.

(4) Deaths from criminal violence, or by a casualty, or by suicide, or suddenly while in apparent health, or when unattended by a physician or in any suspicious or unusual manner, shall be reported forthwith to the county coroner, who shall execute a certificate of death upon a form prescribed by the Board.

Section 17. *Stillbirth Certificates.* In the filing of certificates for medically attended stillbirths, the procedure provided in Section 15 for filing death certificates shall be followed: Stillbirths without medical attendance shall be referred to the county or city health officer or, if there is no health officer, to the coroner, who shall execute the stillbirth certificate. The form of stillbirth certificate shall be prescribed by the Board.

Section 18. *Certificates as Evidence.* Certificates filed under the provisions of this Act shall be prima facie evidence of the facts stated therein.

Section 19. *Certified Copies—Birth Certificates.* Certified copies of birth records containing complete information shall be issued only by the Department, by the ordinary, or by the city or county health officer designated as custodian of local vital statistics records when requested to do so by any of the following:

- (1) The person whose record of birth is registered, if of age.
- (2) Either parent of the person whose record of birth is registered.
- (3) The legal representative of the person whose record of birth is registered.
- (4) Order of any Court of Record.
- (5) Any governmental agency, State or Federal, provided such certificate shall be supplied without cost to the State.

Section 20. *Certified Copies.*

(1) Subject to the provisions of Sections 19 and 24, the Department or ordinary or other custodian of vital statistics records, shall, upon request, issue to any applicant a certified copy of any certificate or any part thereof.

(2) Certified copies of the contents of any certificate on file in the Department or any part thereof, certified by the Director or his deputy appointed for this purpose, shall be considered for all purposes the same as the original.

Section 21. *Fees for Certified Copies.* For certified copies, certifications, and verifications of information from the records filed under this Act, fees shall be collected as follows:

- (1) Full certified copies—\$1.

(2) Short forms—issues under provisions of an Act approved March 11, 1943 (Ga. L. 1943, pages 428-429)—50c.

(3) Verifications of Information on file. Such verifications being limited to such Governmental and private agencies as may be determined by the Board—25c.

Section 22. *Disposition of Fees.* Be it further enacted that all fees received by the Department for certified copies, certifications, verifications, marriage reports, and divorce reports as provided in this Act shall be placed in a special fund, the same being hereby appropriated to the Department of Public Health for the purposes of the enforcement of this Act, the Board being hereby authorized to use such sums as are necessary from this fund for supervision and general expenses of the Department of Public Health and to expend the remainder of said moneys so collected to enforce the provisions of this Act.

Section 23. *Delayed Certificates.* The Board shall establish regulations and forms for the issuance of delayed birth certificates to persons born in the State for whom no birth certificate has previously been filed.

Section 24. *Disclosure of Records.*

(1) The records and files of the Division of Vital Statistics and other vital statistics records are open to inspection, subject to the provisions of this Act and the regulations of the Board; but, it is unlawful for any officer or employee of the Board to disclose data contained in vital statistics records, except as authorized by this Act and by the Board.

(2) Disclosure of illegitimacy of birth or of information from which it may be ascertained may be made only upon order of a court in case where such information is necessary for the determination of personal or property rights and then only for such purposes.

(3) The Department shall not permit the inspection of vital statistics records or issue a certified copy of a certificate or part thereof unless they are satisfied that the applicant therefor has a direct and tangible interest in the matter recorded. The decision of the Department shall be subject to review by the Board of court [sic] under the limitations of this Act.

(4) The Board may permit the use of data contained in vital

statistics records for research purposes, subject to such regulations and under such supervision as the Board may direct.

(5) Subject to the provisions of this section, the Director may direct the Division of Vital Statistics to make a return upon the filing with them of birth, death, and stillbirth certificates and of certain data shown thereon to federal, state, county, or municipal agencies.

Section 25. *Legitimation.* In cases of legitimation, the Division of Vital Statistics, upon proof thereof, shall prepare a new certificate of birth in the new name of the legitimated child. The evidence upon which the new certificate is made and the original certificate shall be sealed and filed and may be opened only upon order of court.

Section 26. *Persons Required to Make Records.* Persons in charge of institutions for care or correction or for treatment of disease, injury, or childbirth shall record and report all statistical data required by this Act relating to their inmates or patients.

Section 27. *Permit for Removal, Burial, or Other Disposition.* When a death or stillbirth occurs or a dead body is found, the body shall not be disposed of or removed from the registration districts until a permit has been issued by the local registrar or the Department. In rural sections of Georgia the time for filing permits for burial or death certificates shall be extended to six (6) days provided the death is of an infant under the age of two (2) weeks.

Section 28. *Prerequisites for Permit.* No permit under Section 27 shall be issued until a certificate of death or stillbirth, as far as it can be completed under the circumstances of the case, has been filed and until all the regulations of the Board in respect to the issuance of such permit have been complied with.

Section 29. *Foreign Permit for Removal, Burial, or Other Disposition of Body.* When death or stillbirth occurs outside this State and the body is accompanied by a permit for burial, removal, or other disposition issued in accordance with the law and regulations in force where the stillbirth or death occurred, the permit shall authorize the transportation into or through this State; but, before the burial, cremation, or other disposal

of the body within the State, the permit shall be endorsed by the local registrar who shall keep a record thereof.

Section 30. *Transmittal of Certificates to Department.* Local registrars shall transmit all original certificates and confidential medical reports filed with them to the Department in accordance with regulations of the Board.

Section 31. *Local Record.* The Department shall prepare a copy of each birth, death, or stillbirth certificate and forward monthly to the ordinary or other designated custodian of vital statistics records, to provide the local record of vital statistics and to such officials as the Board may direct.

Section 32. *Compensation of Local Registrars.* Each local registrar shall be paid the sum of 50 cents for each complete birth, stillbirth, or death certificate returned by him to the Department in accordance with the provisions of this Act and the regulations of the Board. In case no birth, death, or stillbirth was registered during any calendar month, the local registrar shall so report and be paid the sum of 25 cents for the report.

Section 33. *Payment of Fees.* Upon certification by the Department, the fees of local registrars shall be paid by the treasurer of the proper county out of the general fund of the county. The Department shall certify monthly to the treasurer of each county the number of births, stillbirths, and deaths received from each registrar with the amount due each. The ordinary, the county or city health officer, as the case may be, shall be paid a fee of 25 cents for each birth, stillbirth, and death certificate properly filed and indexed by him, said fee to be paid from county funds by the county treasurer.

Sections 34, 35, 36 and 37 repealed by Act of Legislature, Georgia Laws 1947, pages 916-917.

Section 38. *Penalties.*

(1) Any person who wilfully makes or alters any certificate or certified copy thereof provided for in this Act, except in accordance with the provisions of this Act, shall be fined not more than \$1,000 or be imprisoned not exceeding six months, or both fined and imprisoned.

(2) Any person who knowingly transports or accepts for transportation, interment, or other disposition of a dead body

without an accompanying permit issued in accordance with this Act, shall be fined not more than \$25.

(3) Except where a different penalty is provided in this section, any person who violates any of the provisions of this Act or neglects or refuses to perform any of the duties imposed upon him by this Act, shall be fined not more than \$25. (Acts 1945, pp. 236-248.)

Missing Persons—Findings Used As Evidence.

GEORGIA LAWS 1945.

Section 1. Be it enacted by the General Assembly of Georgia, and it is hereby enacted by the authority of the same, that from and after the passage of this Act, a written finding of presumed death, made by the Secretary of War, the Secretary of the Navy, or other officers or employees of the United States authorized to make such findings, pursuant to the Federal Missing Persons Act (56 Stat. 143, 1092, and P. L. 408, Ch. 371, 2nd Sess. 78th Congress; 50 U. S. C. App. Supp. 1001-17), is now or hereafter amended, or a duly certified copy of such finding, shall be received in any Court, office or other place in this State as evidence of the death of the person therein found to be dead, and the date, circumstances and place of his disappearance.

Section 2. Be it further enacted by the authority of the same, that an official written report or record, or duly certified copy thereof, that a person is missing, missing in action, interned in a neutral country, or beleaguered, besieged or captured by an enemy, or is dead, or is alive, made by an officer or employee of the United States authorized by the Act referred to in Section 1, or by any other law of the United States to make the same, shall be received in any Court, office or other place in this State, as evidence that such person is missing, missing in action, interned in a neutral country, or beleaguered, besieged or captured by an enemy or is dead, or is alive as the case may be.

Section 3. Be it further enacted by the authority aforesaid, that for the purposes of Section 1 and Section 2 of this Act, any finding, report or record, or duly certified copy thereof,

purporting to have been signed by such an officer or employee of the United States as is described in said Sections, shall prima facie be deemed to have been signed and issued by such an officer or employee pursuant to law, and the person signing same shall prima facie be deemed to have acted within the scope of his authority. If a copy purports to have been certified by a person authorized by law to certify the same, such certified copy shall be prima facie evidence of his authority so to certify. (Acts 1945, pp. 417-419.)

Rules and Regulations Governing Water Supply and Water Purification System

Section I. It shall be the duty of the mayor of each city, and of the proper officers of all private corporations, partnerships, and of individuals who shall hereafter install a waterworks system, or shall make any change in any existing system, to file with the State Board of Health a true and correct copy of the plans and specifications of the entire system to be installed, or changed by such city, corporation, partnership, or individual, including plans and specifications of such filtration or other purification plant as may be operated by them in connection therewith, and also plans and specifications of all alterations, additions or improvements to such systems which may be made from time to time.

Section II. The words "plans and specifications" as used here shall be construed to mean a true description or representation of the entire system, and also a full and fair statement of how the same is to be operated, and in addition to all other things shall show all the sources through or from which it is, or may be, at any time pumped or otherwise caused or permitted to enter such system. Such plans and specifications shall be certified by the mayor and the city engineer of city corporations, and by such proper officers and the engineer employed by a private corporation for private corporations, and by some individual member of a partnership, or by the individual owner in case of a waterworks owned and operated by partnership or individuals, including the engineer employed, if any.

Section III. On receipt of the plans and specifications by

the State Board of Health they will be inspected in reference to their effect on the public health, and if such Board on inspection finds that the proposed water supply is impure and dangerous to individuals or the public generally, or that the proposed purification system is inadequate to supply a safe water, the said Board on its order may require the corporation, partnership or individual owning and operating the same to make such alterations in such waterworks systems as may be required or advisable in the opinion of said Board, in order that the water supply may be healthful and free of pollution. Such recommendations or orders of the State Board of Health shall be served in writing on such corporations, partnerships, or individuals, and it shall thereupon be the duty of such corporations, partnerships, or individuals to comply with such recommendations or orders.

Section IV. To insure consideration of all essential details and so prevent waste of time in correspondence relative to missing and inadequate data, the following rules and regulations have been adopted to which plans submitted for approval must conform:

A. Submission of Plans and Specifications.

Two sets of plans and specifications shall be submitted to the Georgia State Board of Health for examination at least two weeks prior to the date upon which action is desired. From this it is not to be inferred that action will always be taken within the time mentioned.

B. Information Required.

The plans for a complete water supply and water purification system shall consist of the following parts:

1. A general plan map of the municipality or district, showing the proposed system.
2. Detailed drawings showing construction of any special structures in the distribution system.
3. General and detailed plans for the water purification works.
4. Specifications and comprehensive report upon the proposed system by the designing or consulting engineer. (A prelimi-

nary report containing data and information sufficient for the complete understanding of the project should be submitted to the State Board of Health for its consideration, prior to the submission of detailed plans.)

C. General Plan Map.

1. The general plan map shall be drawn to a scale not greater than 100 nor less than 300 feet to one inch, and covering the entire area of the municipality or district to be supplied with water, and shall accompany each application in the case of a new water system, or any extension or modification of any water supply or water purification system, unless such a general plan of the entire area has been previously submitted. If the municipality is greater than two (2) miles in length, the map may be divided into sections. The sheets shall be bound together and a small index map supplied showing by number the area covered by various sheets.

This map shall show all existing or proposed streets, the surface elevations of all street intersections, and the elevations of the principal parts of the water systems such as water at the intake, in the reservoir or standpipe, etc. The map should show that water supply facilities can be provided for all sections of the municipality or district. The location of intake, valves, hydrants, reservoirs, pumps, standpipes and purification plant, and any special structures, shall be shown and referred to in a legend near the title. The size of pipe shall be written between the street lines and along the pipe. The map shall also show the true or magnetic meridian, title, scale, date, the municipal district boundaries, the mean, low and high water elevations of water at the intake. If the site of the pumping plant is subject to flooding, the elevation of the highest known flood water must be given. The elevations of the street intersections shall be placed outside the street lines in the upper right-hand angle, or opposite their respective positions in the street.

2. Detail drawings of all special appurtenances, such as blow-offs, siphons, intakes, conduits, reservoirs, collecting galleries, etc., shall be submitted. Profiles of long conduits or pipe lines may be plotted to a convenient scale and shown on sheets conforming in size to other sheets making up the set of plans.

D. *Purification Works.*

1. The plans for the purification works shall consist of a general plan upon which reserve area for future extensions must be shown, and also the general layout of the various units of the process, together with the piping system.

2. The detail drawings shall include longitudinal and transverse sections sufficient to show the construction of each structure, unit and part of the plant. They shall also show the under-drainage and wash system, sizes and depth of stone, gravel and sand used for filtering material in the filters. Device for measuring total water treated shall be shown. Arrangement of laboratory shall be shown. Point of application of sterilizing agent shall be shown.

3. The following dimensions of plan sheets shall be used: Distances from top to bottom 20 to 30 inches, length 24 inches, 32 inches, 40 inches, 48 inches, or thereabouts. Each drawing shall have legibly printed thereon the name of the municipality or persons for whom the drawings are made, the name of the engineer in charge, the date, the scale, and such references in the title as are necessary for the complete understanding of each drawing.

E. *Engineer's Report and Specifications.*

1. A report and specifications written by the designing or consulting engineer, shall be presented with all plans for complete systems, and shall give all data upon which the design is based or which is required for the complete understanding of the plans.

2. In the case of surface supplies to be filtered a small scale map of the watershed showing the roads and the number and character of buildings shall be included in the report. Other features which shall be discussed in the report are: storage capacity, average depth, general nature and area of the storage reservoir, liability of odors or taste in supply and removal of color, iron or hardness.

3. If the water supply is to be taken from wells, describe the number, depth, size and construction of the same; method of pumping, capacity of pumps, kind of strainer used, nature of ground through which wells will be driven, and probable flow

of the wells. If collecting galleries are to be used, describe their construction.

4. The following information is required respecting the purification plant: The method of purification and a description of the units of the system; the rate of operation of each of the systems; the rate of operation of each unit of the plant; nature of chemicals used, with a description of the appliances for adding the same to the water; a description of all conditions peculiarly characteristic of the water or locality which in any manner affect the design or operation of the system; a description of all special appliances used, any special methods of maintenance or operation of the plant, and the extent of purification expected or guaranteed. List of plant laboratory equipment with manufacturer's catalog number shall be given.

5. The report shall further include a description of the nature and extent of the area to which it is proposed to supply water, or which will ultimately be supplied from the system, the quantity of water to be supplied daily, and the population to be served, the portion of the system to be constructed at present and the minimum depth of pipe below the surface of the ground. A description of any provision for future units at pumping plants, filters, shall be given. Should there be areas in the municipality or districts which on account of topography or for other reasons cannot be supplied with water, a definite statement to this effect must be made and the probable future supply of this omitted territory should be discussed.

6. If the plans are solely for the extension of the existing system, only such information as is necessary for the comprehension of the plans will be required. This information shall, in general, conform to the above requirements for a complete system.

Section V. No deviation from approved plans and specifications shall be made unless amended plans and specifications showing such proposed changes have been submitted to and approved by the Georgia State Board of Health.

Section VI. Samples of water for bacteriological examination shall be submitted in a manner prescribed by the State Board of Health from each public water supply monthly or as often as required by said Board.

Adopted by the State Board of Health on April 28, 1920, amended January 29, 1930, and re-enacted October 20, 1933.

Rules and Regulations Governing the Impounding of Water

In order to prevent an increase in the prevalence of malaria and to avoid the formation of foci or endemic malaria by the impounding of waters, under and by virtue of authority vested in it by the Legislature of Georgia, the State Board of Health does hereby promulgate and publish the following rules and regulations governing the impounding of waters or damming of water courses in the State of Georgia.

Section 1. Any person, firm, company, corporation, industry, county, municipality and any state or federal government, their agencies, departments or assigns or other public or private bodies or agencies who shall propose or desire to impound water or proposes to raise the level of a previously existing pond or other body of water by the elevation of point of overflow of a dam, shall, prior to the initiation of any construction activities, make application to the State Board of Health, or its Department of Public Health, for and obtain from it preliminary permit for the impounding of such water.

PROVIDED: That this section, shall not be construed to apply to ponds of less than 1/10 acre for watering stock or other domestic purposes, nor to impound waters so located that no portion of them lies within one mile of any permanent human habitation, congregation or place of business, other than that of the owner.

Section 2. Such application for a preliminary permit shall be made in writing in the name of the person, firm, corporation, county, or municipality making application, and shall be accompanied by a description of the proposed project, its purpose, and its exact location; also by an accurate plat of the area to be affected, showing particularly the maximum and minimum water levels.

Section 3. Such a temporary permit for the inauguration of initial construction shall be issued by the State Board of Health when the following rules and regulations, or modifications thereof, have been made to apply to the said project.

PROVIDED: That all the provisions of this Section need not apply to impounding projects when, in the opinion of the

State Board of Health, there are other factors or circumstances which render or may render the observance or compliance with the provisions of this Section unnecessary or impracticable.

3-a. In the area to be occupied by the reservoir, its branches, bights, and indentations, all brush, trees, undergrowth, logs, stumps, and similar objects, which, if not removed, would float or collect floatage on the surface of the impounded water, and all of the above material that is lying on the ground or remaining in original or new position, which would probably cause collection of floatage to gather, and thus constitute conditions favorable to the protection of larvae of mosquitoes capable of conveying malaria, shall be removed, burned, otherwise satisfactorily disposed of, prior to the impounding of water. Note: The above does not include grass, vegetation, brush, trees, stumps, etc., which will be permanently and completely submerged at time of low water and which are, therefore not of sanitary importance.

3-b. In the area to be occupied by the reservoir, its branches, bights, and indentations, all brush, trees, and undergrowth which would pierce the surface at low water level shall be cut off at least one foot below such water level, to prevent the collection and anchorage of any possible floatage, egg rafts, etc.

3-c. All depressions which will be filled with water from the reservoir, its branches, bights, and indentations at time of maximum water level, in which water will be retained at lower stages of the water level, thus forming separate pools, shall be connected with the normal body of the reservoir, or any of its branches, bights or indentations, with a ditch or culvert which will permit complete drainage at low-water stage. Note: Such places are generally few in number, but are of importance in mosquito production.

Section 4. A preliminary permit for the impounding of water having been granted by the State Board of Health, and construction work on the project begun, a representative of the State Board of Health shall make inspection of the project from time to time, and as requested by the permit holder, the State Board of Health shall approve in writing of that portion of the work as is outlined in Section 3 of the Regulations which has been satisfactorily completed.

As the said representative of the State Board of Health de-

termines that the preliminary permit holder is complying with the provisions of Section 3-a of these Regulations and as it shall appear that the preliminary permit holder has complied with the provisions of Section 3-b of these Regulations, the permit holder may thereupon proceed, as authorized by written approval from the State Board of Health, with the impounding of water to a level specified by said representative of the State Board of Health, and, when it shall appear that the permit holder has complied with the Regulations to the satisfaction of the Board, said Board shall certify such fact to the permit holder in writing and the permit holder may thereupon proceed with the impounding of water to a maximum high water level.

Section 5. The State Board of Health shall thereupon issue a final permit for the maintenance of an impounding project by said applicant, the validity of said permit being contingent upon the observance of the following regulations:

5-a. During the mosquito breeding season the permit holder shall regularly and frequently remove all flottage and floating debris in the reservoir, its branches, bights, and indentations which are producing mosquitoes within one mile of human habitation, and shall during mosquito breeding season satisfactorily apply such larvicide as approved by the State Board of Health to all *Anopheles* breeding areas of the reservoir or parts of the impounded waters.

5-b. Prompt and proper measures shall be taken to prevent the growth of cat-tails, bulrushes, and other aquatic or semi-aquatic vegetation which offers protection for *Anopheles* larvae.

5-c. After the water has been impounded, the State Board of Health shall from time to time make such inspections of the impounded waters and adjacent areas as are deemed essential; and any conditions found on the impounded water project that are, or may be, detrimental to public health, or are likely to cause an increase of malaria, shall be modified by the permit holder so as to be satisfactory to the State Board of Health.

5-d. These Regulations shall govern any change in water level or the re-impounding of waters, and as soon as any proposed changes affecting the maximum water elevation are contemplated, the State Board of Health shall be notified in writing.

Section 6. Failure to comply with the provisions of any section or subsection of these Regulations shall constitute a violation thereof, and shall constitute, according to Chapter 88-99 of The Code of Georgia of 1933, a misdemeanor, punishable as provided in that Act.

Adopted by the State Board of Health on January 23, 1924, amended July 2, 1925, January 29, 1930, re-enacted October 20, 1933, and amended March 22, 1939 and October 18, 1945.

Rule Regulating the Manufacturing, Importation and Bottling of Waters

Section 1. It shall be the duty of every manufacturer, importer, bottler or other person, firm, corporation, or company manufacturing, importing or bottling in the State of Georgia, any artificial or natural mineral, spring or other water for drinking purposes to first file with the State Board of Health the name of such water and the exact location from which it is obtained. And also to first have made a bacteriological examination, and chemical analysis if required, by the State Board of Health Laboratory.

Section 2. No person, firm, corporation or company shall manufacture, import or bottle in the State of Georgia any artificial or natural mineral, spring or other water for drinking purposes without first obtaining a permit from the State Board of Health, and without a renewal permit before February 1, each year thereafter. The State Board of Health reserves the right to revoke any permit or permits at any time when after a thorough investigation, and bacteriological examination and opportunity for public hearing, the domestic use of the water of any person, persons, firm, corporation or company shall appear to be a menace to the public health.

Section 3. It shall further be the duty of every manufacturer, bottler, importer or other person, firm, corporation or company manufacturing, bottling or importing in the State of Georgia any artificial, natural mineral, spring or other water for drinking purposes to provide the State Board of Health with at least one bottled sample, as prepared for sale on the market, every month for bacteriological examination as to purity.

Adopted by the State Board of Health on January 25, 1928, and re-enacted October 20, 1933.

PENALTIES

88-9901, Georgia Code 1933. *Failure of public officers to obey quarantine and sanitary regulations.*—Upon the failure of any public or municipal officer of this State to obey any quarantine and sanitary rule and regulation adopted by the State Board of Health pursuant to section 88-112, such officer shall be subject to a fine of not more than \$50. (Acts 1903, pp. 72, 73.)

88-9902, Georgia Code 1933. *Violating county health rules and regulations.*—Any person who shall violate any one or more of the sanitary rules and regulations adopted by county authorities, mentioned in sections 88-203 to 88-205, after being personally served with a written or printed copy of the same, shall be guilty of a misdemeanor. (Acts 1901, pp. 61, 62.)

88-9903, Georgia Code 1933. *Violation of certain quarantine regulations after notice.*—Any person violating any of the regulations prescribed by the corporate authorities of any city or town pursuant to section 88-403 after five days' personal or other notice thereof, given in such manner as may be prescribed by such corporate authorities, or, in the absence of any mode so prescribed, by notice of such regulation for five days in some newspaper in such city or town, or where there is no newspaper, by notice posted at some public place in such city or town for the same length of time, shall be guilty of a misdemeanor: Provided, that nothing herein contained shall prevent the infliction by the corporate authorities having power to pass ordinances or bylaws of such other penalty, not exceeding \$100 fine, in lieu of the penalty first above named, as may be prescribed in any such ordinance or bylaw.

88-9904, Georgia Code 1933. *Refusal to answer inquiries as to disease on board vessel.*—Any master, seaman or passenger belonging to a vessel supposed to have any infection on board, or from a port where any dangerous infectious disease prevails, refusing to answer on oath such inquiries as may be made by any health officer, relating to any infection or disease, shall be guilty of a misdemeanor.

88-9905, Georgia Code 1933. *Failure by master of vessel to deliver to officer his bill of health, etc.*—If the master of any vessel ordered to perform quarantine shall fail to deliver to the officer appointed to see quarantine performed, his bill of health

and manifest, logbook and journal, as required by section 88-407, or to repair in proper time after notice to the quarantine ground, or shall depart thence without authority, he shall be punished as for a misdemeanor.

88-9906, Georgia Code 1933. *Quarantine inland traveler traveling before discharged*.—Any person coming into a town or city by land, from a place infected with a contagious disease, restrained under the provisions of section 88-408, traveling before he is discharged, shall be punished as for a misdemeanor.

88-9907, Georgia Code 1933. *Pilot entering vessel with disease on board; master refusing to answer inquiry*.—Any pilot, knowing that any malignant, contagious, or infectious disease is on board a vessel, who shall enter such vessel, shall, in addition to being removed from office as provided in section 88-409, be subject to the penalty of \$100; and any master or commander of a vessel refusing to answer any reasonable inquiry made by any pilot as to the state of health in such vessel, or giving false information in answer, shall be fined in a sum not exceeding \$500. (Acts 1793, Cobb, 370.)

88-9908, Georgia Code 1933. *Nonobservance of quarantine by persons on board vessel*.—Any person on board any ship or vessel in which a malignant, contagious, or infectious disease shall exist, or while such ship or vessel is performing quarantine, who shall come on shore or land from such vessel, without permission from the proper authority, and any person (except the health officer or visiting physician) who shall go on board such vessel and return without such permission, shall be fined and imprisoned at the discretion of the court. (Acts 1793, Cobb, 369.)

88-9909, Georgia Code 1933. *Refusal to certify performance of quarantine*.—Every refusal by the health officer of any port, or the authorized visiting physician thereof, after a vessel shall have duly performed quarantine, to give a certificate thereof to the master or commander, as required by section 88-411, shall subject such health officer or physician to a penalty of \$100.

88-9910, Georgia Code 1933. *Concealing smallpox*.—Any physician or other person who shall conceal a case of smallpox, or varioloid, or any modification of the same, within any incorporated city, or town, or in any county, by not giving immediate

notice thereof to the mayor, intendant, or health officer, or ordinary, shall be punished as for a misdemeanor. (Act 1830, Cobb, 375.)

88-9911, Georgia Code 1933. *Spreading smallpox*.—Any physician, surgeon, or other person, wilfully endeavoring to spread the smallpox, without inoculation, or by inoculation with matter of the smallpox, or using any inoculation other than that called vaccination, unless by special commission or authority from the court of ordinary of the county where the smallpox shall make its appearance, shall be guilty of a misdemeanor. (Cobb, p. 816.)

88-9912, Georgia Code 1933. *Transportation, sale, etc., of imported second-hand clothing*.—Any person who shall violate any provision of section 88-418, prohibiting importing, selling, buying, and bartering of second-hand or cast-off clothing imported into this State, shall be punished as for a misdemeanor. (Acts 1884-5, p. 137.)

88-9913, Georgia Code 1933. *Violation of orders of Governor as to contagious or infectious diseases*.—Any person violating the orders or regulations issued by the Governor under the provision of section 88-419, to prevent the spread of contagious or infectious diseases, shall be punished as for a misdemeanor. (Act 1793, Cobb, 371.)

88-9914, Georgia Code 1933. *Violation of quarantine*.—Any person who shall come into this State, by land or water, from any place infected with a contagious disease, and in violation of quarantine regulations, shall be prosecuted in any county in which he may be found, and shall be punished as for a misdemeanor. (Acts 1865-6, p. 233.)

88-9915, Georgia Code 1933. *Violation of law to prevent blindness from gonococcus infection*.—Any person who shall violate any of the provisions of sections 88-420 and 88-421 relating to the treatment of children to prevent blindness from gonococcus infection and requiring the nurse or attendant of an infant to report any inflammation of the eyes of such infant developing within two weeks after the infant's birth, or any rule by the State Board of Health thereunder, shall be guilty of a misdemeanor. (Acts 1918, p. 255; 1931, pp. 7, 11; 1933, p. 7.)

88-9916, Georgia Code 1933. *Violation of venereal disease law*.—Any person who shall violate any of the provisions of

Chapter 88-5 or any lawful rule or regulation made by the State Board of Health pursuant to the authority therein granted or pursuant to the authority granted by any of the statute laws, or who shall fail or refuse to obey any lawful order issued by any State, county, or municipal health officer pursuant to the authority granted in said law or any other law or regulations prescribed thereunder, shall be guilty of a misdemeanor. (Acts 1918, p. 277; 1931, pp. 7, 11; 1933, p. 7.)

88-9917, Georgia Code 1933. *Transportation of dead bodies.*—Any common carrier, railroad, express company, or other person, firm or corporation, who shall violate Chapter 88-6, relating to the transportation of dead bodies, shall be guilty of a misdemeanor, and upon conviction thereof, shall be sentenced to pay a fine of not less than \$50 nor more than \$100 for each offense. All fines collected for the violation of any of the provisions of the aforesaid Chapter shall be paid into the common school fund. (Acts 1916, pp. 77, 83.)

88-9918, Georgia Code 1933. *Illegal traffic in human bodies.*—Whoever shall sell or buy such body as is required by law to be delivered to the Board for the distribution and delivery of dead bodies, or any other dead human body, or in any way traffic in the same, or shall transmit or convey, or procure the transmission or conveyance of same to be done, such body, or any other dead human body, to any place outside of this State for purposes of sale or dissection, shall be punished by imprisonment and labor in the penitentiary not less than one nor more than 10 years. (Acts 1887, p. 87.)

88-9919, Georgia Code 1933. *Illegal removal of dead body from grave.*—Whoever shall remove the dead body of a human being from any grave or other place of interment, or from any vault, tomb, sepulchre, or from any other place, for the purpose of selling or dissecting the same, or from mere wantonness, shall be punished by imprisonment and labor in the penitentiary not less than one nor more than 10 years; and any person who shall receive or purchase any dead human body, knowing it to have been so disinterred or removed from any tomb, vault, or sepulchre or such other place, for the purpose aforesaid, shall receive the same punishment. (Cobb, 818. Acts 1865-6, p. 233; 1887, p. 87.)

88-9920, Georgia Code 1933. *Omission to perform duties as to*

dead bodies.—Any person having duties enjoined upon him by the provisions of sections 88-701 to 88-706, relating to the distribution of dead bodies, who shall refuse or omit to perform the same, shall be guilty of a misdemeanor. (Acts 1887, p. 90.)

88-9921, Georgia Code 1933. *Disinterring by coroner without good grounds.*—If any person makes affidavit to facts to authorize the coroner to disinter a body, or the coroner does so of his own motion, and it is done without good grounds, or from malice or mischief, the person so swearing, or the coroner so officiating, shall be punished as for a misdemeanor. In such cases all the circumstances shall go to the jury; and if they believe there were reasonable grounds for the disinterment at the time it took place, it is their duty to acquit.

88-9922, Georgia Code 1933. *Interference in selection of caskets.*—Any owner, manager, superintendent, or person having in charge any cemetery in this State who, either for himself or as agent for another person or corporation, shall interfere in any way in the selection of any particular model or design of casket used by those having in charge the burial of any human corpse, or in like manner attempt to prevent the use of a receptacle for the casket of any kind that the persons interested and engaged in the burial may desire to use, or suggest the use of any style of such receptacle in preference to another, shall be guilty of a misdemeanor: Provided, that this section shall not apply to interments made upon land belonging to such cemetery association itself, nor prevent any owner of land from preventing the burial of corpses upon his own land. (Acts 1912, p. 105.)

88-9923, Georgia Code 1933. *Carcasses of animals, how placed or buried.*—If any person shall place the carcass of a horse, cow, sheep, goat, dog, or other animal in any stream or road, street, lane, or alley, or place any such carcass upon the premises of another without burying it so deep as to prevent all stench therefrom, he shall be guilty of a misdemeanor. (Acts 1890-1, p. 242; 1908, p. 41.)

88-9924, Georgia Code 1933. *Owner must bury dead animals and fowls.*—In all counties in which there is a city of 1,000 or more inhabitants, according to the last Federal census, if a domestic animal or domestic fowl shall die without the corporate limits of a town or city and shall be within two miles of the

residence of the owner thereof, and the owner shall fail or refuse to bury the carcass deep enough to prevent stench therefrom, within three hours after notice of the death and the location of the carcass, he shall be guilty of a misdemeanor. The carcass of such animal may, within three hours after such notice, be removed and at once manufactured into fertilizers. (Acts 1895, p. 86.)

88-9925, Georgia Code 1933. *Owner must bury stale or decaying matter.*—In all counties in which there is a city of 1,000 or more inhabitants, according to the last Federal census, if the owner of stale or decaying vegetable or animal matter, situated within this State and without the corporate limits of a town or city, shall fail or refuse to bury it so deep as to prevent any stench therefrom, within three hours after notice that it has become offensive to the smell or dangerous to health, he shall be guilty of a misdemeanor. (Acts 1895, p. 86.)

88-9926, Georgia Code 1933. *Storing of dangerous explosives by aliens or nonresidents.*—Any alien, or nonresident person, company, partnership, or corporation who shall store or keep dynamite, gunpowder or other dangerous explosives in this State, shall be guilty of a misdemeanor: Provided, that such person, company, partnership or corporation has no business or enterprise located within the confines of this State that requires the use of said explosives. (Acts 1921, p. 246.)

88-9927, Georgia Code 1933. *Illegal purchase, sale, or use of explosives.*—Any person or corporation violating any of the provisions of sections 88-801 to 88-806, relating to possession, sale, or purchase, of explosives, shall be guilty of a misdemeanor. (Acts 1921, pp. 247, 250.)

88-9928, Georgia Code 1933. *Violation of law protecting correspondence of inmates of private insane asylums.*—Any superintendent, officer, or employee of a private insane asylum, who refuses or neglects to comply with, or wilfully and knowingly violates, any of the provisions of sections 88-901 and 88-902 relating to the protection of the correspondence of inmates of private insane asylums, shall be punished as for a misdemeanor, and shall thereafter be incapable of holding an office in any asylum. (Acts 1890-1, p. 237; 1892, p. 110; 1895, p. 63.)

88-9929, Georgia Code 1933. *Violation of vital statistics law.*

—Any person who, for himself or for an officer, agent, or employee of any other person or of any corporation or partnership, (a) shall inter, cremate, or otherwise finally dispose of a dead body of a human being, or permit the same to be done, or shall remove such body from the primary registration district in which the death occurred or the body was found, without the authority of a burial or removal permit issued by the local registrar of the district in which the death occurred or in which the body was found, or (b) shall refuse or fail to furnish correctly any information in his possession, or shall furnish false information affecting any certificate or record, required by Chapters 88-11 and 88-12, or (c) shall wilfully alter otherwise than is provided by sections 88-1207, 88-1208 and 88-1209, or shall falsify any certificate of birth or death, or any record established by this law, or, (d) being required by Chapters 88-11 and 88-12 to fill out a certificate of birth or death and file the same with the local registrar, or deliver it upon request, to any person charged with the duty of filing the same, shall fail, neglect or refuse to perform such duty in the manner required by such law, or, (e) being a local registrar or deputy registrar, shall fail, neglect, or refuse to perform his duty as required by such law, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for the first offense be fined not less than \$5 nor more than \$50, and for each subsequent offense not less than \$10 nor more than \$100, or be imprisoned in the county jail not more than 60 days, or in the discretion of the court be both fined and imprisoned. (Acts 1927, p. 369.)

RELATED LEGISLATION

Dance-Halls, Etc., County Permit; Tax.

GEORGIA LAWS 1937.

Section 1. *County permit required.*—Be it enacted by the General Assembly of Georgia, and it is hereby enacted by authority of the same, That from and after the passage of this Act, no person, firm or corporation shall establish, maintain, or operate any public dance-hall, boxing or wrestling arena or amusement place, tourist-camps and barbecue stands, for money or profit outside the limits of incorporated towns or cities in any county in this State having a population of 3,000 or more,

according to the last or any future Federal census, without first obtaining the permission of the commissioners of roads and revenues or other authority in charge of such counties.

Section 2. *Authority of commissioners.*—Such commissioners of roads and revenues or other authority in charge of said counties shall have authority to grant or refuse such permission, or to grant the same for such time and under such regulations as they may deem proper for the public good. Such commissioner of roads and revenue or other authority in charge of said counties shall have authority to levy a license or occupational tax on such persons, firms or corporations included within the provisions of this Act.

Section 3. *Penal violations.*—Any person, firm or corporation establishing, maintaining or operating any such establishment as herein set forth without securing said permission, shall be guilty of a misdemeanor and such establishment shall be subject to be abated as a nuisance. (Acts 1937, pp. 624, 625.)

Dance-Halls, Etc., County Permit; Tax.

GEORGIA LAWS 1937.

Section 1. *County permit.*—Be it enacted by the General Assembly of Georgia and it is hereby enacted by authority of the same, That from and after the passage of this Act, no person, firm or corporation shall establish, maintain, or operate any public dance hall, swimming pool, tourist camp, barbecue stand, boxing or wrestling arena or amusement place for money or profit outside the limits of incorporated towns or cities in any county in this State having a population of more than 57,000 according to the last or any future Federal census, without first obtaining the permission of the Commissioners of Roads and Revenue or other authority in charge of such counties.

Section 2. *Authority of commissioners.*—Such Commissioners of Roads and Revenue or other authority in charge of said counties shall have authority to grant, renew or refuse such permission, or to grant or renew the same for such time and under such regulations as they may deem proper for the public good. Such Commissioners of Roads and Revenue or other authority in charge of said counties shall have authority to levy a

license or occupational tax on such persons, firms or corporations included within the provisions of this Act.

Section 3. *Penal violation.*—Any person, firm or corporation establishing, maintaining, or operating any such establishment as herein set forth without securing the said permission, shall be guilty of a misdemeanor and such establishment shall be subject to be abated as a nuisance. (Acts 1937, pp. 625-627.)

State Board of Pharmacy—Drug Inspection.

GEORGIA LAWS 1939.

Section 1. *Section 42-102 of Georgia Code 1933 amended; Appointment of Chief Drug Inspector; Duties.*—That Section 42-102 of the Code of Georgia of 1933, relating to the appointment, duties and salary of the Chief Drug Inspector, be and the same is hereby amended as follows: By striking and repealing the first sentence of said Section and inserting in lieu thereof the following: “The Georgia State Board of Pharmacy shall, at the next regular meeting of said Board, appoint a Chief Drug Inspector, who shall hold office at the pleasure of the Board, and should any vacancy occur in said office for any cause whatsoever, said Board shall, either at a regular or called meeting, appoint his successor”; by striking and repealing the words “Commissioner of Agriculture” in line 7 of said Section and inserting in lieu thereof the words “Georgia State Board of Pharmacy”; by striking and repealing the words “Commissioner of Agriculture” in line 13 of said Section and inserting in lieu thereof the words “Georgia State Board of Pharmacy”; by striking and repealing the words “Commissioner of Agriculture” in line 14 of said Section and inserting in lieu thereof the words “Georgia State Board of Pharmacy, or the Secretary of said Board”, so that said Section, as amended, shall read as follows:

“The Georgia State Board of Pharmacy shall, at the next regular meeting of said Board, appoint a Chief Drug Inspector, who shall hold office at the pleasure of the Board, and should any vacancy occur in said office for any cause whatsoever, said Board shall, either at a regular or called meeting, appoint his successor. The salary of the chief drug inspector shall not exceed the sum of \$3,000 per annum. His whole time shall be at

the disposal of the Georgia State Board of Pharmacy and his duties shall be to visit and inspect manufacturing establishments, chemical laboratories and such other establishments as manufacture and put up for sale such articles as are known as family remedies, grocers' drugs, flavoring extracts, flavoring essences, toilet articles, bottlers' supplies, stock powders and veterinary remedies; and to perform such other duties as may be directed by the Georgia State Board of Pharmacy. He shall report to the Georgia State Board of Pharmacy or the Secretary of said Board any and all violations of any of the drug laws of this State and particularly any person operating without licenses as required by laws."

Section 2. *Section 42-103 of Georgia Code 1933 amended; Proceedings in drug violations.*—That Section 42-103 of the Code of Georgia of 1933, relating to proceedings to be had on inspector's report, be and the same is hereby amended as follows: By striking and repealing the first sentence of said Section and inserting in lieu thereof the following:

"When such report shall have been made to the Board, or to the Secretary thereof, he or they shall cite such person to appear before the Board and the Attorney General for a hearing, as provided in Section 42-113"; by striking and repealing the words "Commissioner of Agriculture" in lines 5 and 6 of said Section and inserting in lieu thereof the words "the Board", so that said Section, as amended, shall read as follows:

"When such report shall have been made to the Board, or to the Secretary thereof, he or they shall cite such person to appear before the Board and the Attorney General for a hearing, as provided in Section 42-113. If after such hearing they shall decide that any of the drug laws have been violated, the Board shall certify the facts to the proper prosecuting official, as directed in Section 42-113. When such facts shall have been certified to any solicitor general, it shall be his duty to prosecute the offenders, whether the prosecution shall arise under the provisions of this law or under the general laws of this State."

Section 3. *Section 42-113 of Georgia Code 1933 amended; Examination of foods and drugs; Hearings on adulteration and misbranding; Prosecution.*—That Section 42-113 of the Code of Georgia of 1933, relating to the examination of specimens of

foods and drugs, be and the same is hereby amended as follows: By inserting between the words "shall" and "cause" in line 8 of said Section the following: "in the case of foods, and the Georgia State Board of Pharmacy shall in the case of drugs"; by inserting between the words "General" and "under" in line 11 of said Section the words "in the case of foods, and before the Georgia State Board of Pharmacy and the Attorney General in the case of drugs,"; by inserting after the word "Agriculture" in line 13 of said Section the words "where an adulteration or misbranding of foods is involved, or the Georgia State Board of Pharmacy where an adulteration or misbranding of drugs is involved,"; by inserting between the words "General" and "that" in line 18 of said Section the words "in the case of adulterated or misbranded foods, or the Georgia State Board of Pharmacy and the Attorney General in the case of adulterated or misbranded drugs,"; by inserting between the words "or the Georgia State Board of Pharmacy, as the case may be,"; by inserting between the words "Commissioner" and "shall" in line 24 of said Section the words "or the Board"; by striking the words "of Agriculture" in line 28 of said Section and inserting in lieu thereof the words "or Board"; so that said Section, as amended, shall read as follows:

"The examination of specimens of foods and drugs shall be made by the State Chemist or under his direction and supervision for the purpose of determining from such examination whether such articles are adulterated or misbranded within the meaning of this Title; and if it shall appear from any such examination that any of such specimens is adulterated or misbranded within the meaning of this Title, the Commissioner of Agriculture shall, in the case of foods, and the Georgia State Board of Pharmacy shall in the case of drugs, cause notice thereof to be given to the party from whom such sample was obtained. Any party so notified shall be given an opportunity to be heard before the Commissioner of Agriculture and the Attorney General, in the case of foods, and before the Georgia State Board of Pharmacy and the Attorney General in the case of drugs, under such rules and regulations as may be prescribed by them, and if it shall appear that any of the provisions of this Title have been violated by such party, the Commissioner of Agriculture where an adulteration or misbranding of foods is involved, or the Georgia State Board of Pharmacy where an adulteration or misbranding of drugs is involved,

shall at once certify the facts to the proper prosecuting attorney, with a copy of the results of the analysis of the examination of such article, duly authenticated by the analyst or officer making such examination, under the oath of such officer. In case it shall appear to the satisfaction of the Commissioner of Agriculture and the Attorney General in the case of adulterated or misbranded foods, or the Georgia State Board of Pharmacy and the Attorney General in the case of adulterated or misbranded drugs, that the article involved was shipped in interstate commerce, or the act complained of comes under the supervision and jurisdiction of the United States, the Commissioner of Agriculture or the Georgia State Board of Pharmacy, as the case may be, shall certify the case to the United States district attorney in whose district the violation may have been committed; but if it shall be under the jurisdiction of the courts of this State, the Commissioner or the Board shall certify the case to the solicitor of the court in the county where the offense occurred. It shall be the duty of the solicitor general to prosecute all persons violating any provisions of this Title, as soon as he shall receive the evidence transmitted by the Commissioner or Board. After judgment of the court, notice shall be given by publication in such manner as may be prescribed by the rules and regulations aforesaid."

Section 4. *Legislative intent.*—That the purpose and intent of this Act is to divest the Commissioner of Agriculture of the authority to appoint the chief drug inspector or to supervise, direct or control his duties, and to vest the power of appointing the chief drug inspector in the Georgia State Board of Pharmacy, and to provide that all of his duties shall be performed subject to the supervision, direction and control of said Board; to consolidate all of the powers and functions of the chief drug inspector under the control, supervision and direction of the Georgia State Board of Pharmacy, in the interest of efficiency and of the public health, safety and welfare. However, nothing contained therein shall be construed as to repeal the provisions of Chapter 73-1 of the Code of Georgia of 1933 with reference to the powers, duties and functions of the Chief Drug Inspector in connection with the manufacture, sale or labeling of paints, flaxseed or linseed oil, or other matters referred to in said chapter, other than that the duties of the chief drug inspector performed with reference to these matters shall be per-

formed under the supervision, direction and control of the Georgia State Board of Pharmacy.

Section 4-a. *Transfer of appropriation.*—The General Assembly shall in the appropriations bill transfer funds now appropriated to the Department of Agriculture for the support of the drug department to the State Board of Pharmacy to carry into effect the provisions of this Act. (Acts 1939, pp. 228-233.)

Dangerous Drug Act.

GEORGIA LAWS 1939.

Section 1. *Drug enumerated; Prescription.*—It shall be unlawful for any person, firm, corporation or association to sell, give away, barter, exchange, distribute or possess in the State of Georgia amytal, luminal, veronal, barbital, acid diethyl-barbiturie, sulfanilamide, prontylin, neoprontosil, or any salts, derivatives or compound of the foregoing substances, or any preparation or compound containing any of the foregoing substances, of their salts, derivatives of compound or any trade-marked or copyrighted preparation or compound registered in the United States Patent Office containing more than four (4) grains to the avoirdupois or fluid ounce of the above substances, except on a prescription of a duly licensed physician as defined by this Act and such prescription shall be compounded only by a registered pharmacist in accordance with the laws of this State. The provisions of this Act shall not apply to the sale at wholesale by recognized drug jobbers or wholesalers and drug manufacturers to pharmacists or drug stores or to physicians qualified to practice their profession according to the law, nor to the sale by pharmacists in drug stores to one another.

Section 2. *Physician defined.*—As provided by this Act a “physician” means a person authorized by the laws of this State to practice medicine and any other person authorized by law to treat sick and injured human beings and animals in this State and to use, mix, prepare, dispense and administer drugs in connection with such treatment.

Section 3. *Labels.*—Whenever a pharmacist dispenses a dangerous drug as defined in this Act, he shall in each case place

upon the container the following: name of the patient, name of the physician prescribing such drug, name and address of the drug store or pharmacy from which such drug was dispensed, together with the date of the prescription.

Section 4. *Information required on prescriptions.*—Any physician as defined in this Act when prescribing dangerous drugs as set forth in Section 1 of this Act shall in each case give the name and address of the patient, together with complete directions for administering. Any physician as defined in this Act when dispensing dangerous drugs as set forth in Section 1 of this Act shall be required to comply with Section 3 of this Act.

Section 5. *Legal possession.*—Possession and control of dangerous drugs as set forth in Section 1 of this Act shall be legal only if in the original container in which it was dispensed by the pharmacist or the physician and the burden of any exception shall be upon the defendant. No person shall obtain or attempt to obtain any of the dangerous drugs as set forth in Section 1 of this Act by the use of a fictitious name or by the giving of a false address.

Section 6. *Enforcement.*—It is hereby made the duty of all law-enforcement officials to enforce all provisions of this Act.

Section 7. *Punishment.*—Any person violating any provision of this Act shall be deemed guilty of a misdemeanor and upon conviction shall be punished as for a misdemeanor. (Acts 1939, pp. 288-290.)

Sterilization—State Board of Eugenics.

GEORGIA LAWS 1937.

Section 1. *Board membership; Vacancy.*—A State Board of Eugenics is hereby created, to be composed of the Chairman of the State Board of Control, the Director of the State Board of Health, and the Superintendent of the Milledgeville State Hospital, any two of whom may act as such Board. These members shall serve as this Board without compensation except for actual traveling expenses, which said expenses shall be paid on warrant on the State Treasury, duly approved by the Governor, and the clerical and office records of the Board shall be part of the work of the Milledgeville State Hospital.

If any of the above named State Departments should be discontinued, the Governor of this State shall appoint a suitable party to fill the vacancy on the Board of Eugenics created thereby.

Section 2. *Records*.—It shall be the duty of the Board to pass on applications for eugenic sterilization made in accordance with the provisions of the law, and to keep a record of such sterilizations. This record shall not be open to the public inspection, except for such purposes as the Board may approve.

Section 3. *Operations on recommendation*.—When it shall appear to the superintendent, manager, or director, of any State home or hospital for mental or physical disease, or any State colony or institution for the care of the mentally or physically defective, deficient, or diseased, or the warden or superintendent of any State prison or penitentiary, correction school or reformatory, detention home, or camp, that a patient or inmate under the care of, or in such institution, would be likely, if released without sterilization, to procreate a child, or children, who would have a tendency to serious physical, mental, or nervous disease or deficiency, said superintendent or manager, after a consultation with his medical staff or any medical authority, shall submit to the State Board of Eugenics a recommendation that a surgical operation be performed upon said person for the prevention of parenthood. Such operation shall be a vasectomy for males, and a salpingectomy for females, or some similar operation that would not unsex the patient or inmate thereof.

Section 4. *Certified statement*.—This recommendation shall be in writing and accompanied by a certified statement containing the history of the patient as shown in the records of the institution, camp, penitentiary, school, colony, reformatory, prison, etc., so far as it bears upon the recommendation for sterilization and setting forth the particular reasons why sterilization is recommended.

Section 5. *Notice of application; Protest; Evidence*.—The superintendent, manager or director of any such institution or penitentiary or camp or other place of incarceration shall give notice by registered mail or otherwise, to the legal representative or next of kin of said patient or inmate, if the name and address of any such person is known, of the application for sterilization, and time and place of hearing on said application.

The patient or inmate, or his legal representative or next of kin, shall have the right to file with the said Board of Eugenics, a protest, with any records or affidavits of facts bearing on the case, and to appear and introduce testimony before the State Board of Eugenics if desired, and to appeal from any decision of said Board, to the courts as provided by this Act. The Board may require additional facts or evidence from any party to the proceedings, before passing on the case. Any member of said Board shall have power to administer oath to any document or witness in such case.

Section 6. *Rules, etc.*—The said Board is hereby empowered to make and promulgate any rules and regulations for the enforcement and promulgation of this Act.

Section 7. *Approval of recommendation; Patient's physician.*—If in the judgment of this Board, procreation by said patient or inmate would be likely to procreate children or a child, who by reason of inheritance would have a tendency to serious physical or mental disease or mental deficiency, it shall be the duty of the Board to approve said recommendation within 30 days after its receipt and to send to the superintendent, manager, or director of such institution or other place of incarceration, a written order, signed by at least two members of the board, directing him to proceed with the sterilization as provided in this Act, to-wit: a vasectomy for males, and a salpingectomy for females, or some similar operation. Nothing in this Act shall be construed to empower or authorize the Board to interfere in any manner with the right of the patient or his representative to select a competent physician of his own choice, for consultation or operation at his own expense.

Section 8. *Copy of order to guardian or relative; Duty of solicitor-general.*—The Board shall also send a copy of the order for sterilization to the legal guardian or known next of kin of the patient in this State, if known, accompanying it by a certified copy of the superintendent's or manager's or director's recommendation, setting forth the grounds upon which sterilization is held desirable, and notification that the patient or his legal representative has the right to appeal to the courts. If no near relative is known and no legal guardian has been appointed, such notice and copies thereof shall be sent to the Solicitor General of the Superior Court of the county from which the patient or inmate was committed, and it shall be his duty

to protect the rights and best interests of the patient or inmate of any such institution or place of incarceration.

Section 9. *Appeal*.—If it appears to the patient or inmate or to his or her representative that the proceedings taken have not conformed with the law, or that the reasons given for sterilization are not adequate or well founded, or for any other reason the order is not legal or is not correct as applied to this individual, an appeal may be taken from the State Board of Eugenics to the Superior Court of the county containing the institution or place of incarceration in which said patient or inmate is under care. The patient or inmate, or representative of said patient or inmate, shall have 10 days after the receipt of the records above mentioned, to file with the Board of Eugenics, an application for appeal to the Superior Court of the county in which he or she is located. If no appeal is taken within such 10 days, the order of the Board shall be carried out as provided in this Act.

Section 10. *Records to court; Trials*.—Such appeal may be taken by filing within 10 days with the State Board of Eugenics a petition to the Superior Court of the county in which said patient is detained, setting forth the grounds of the appeal. On receipt of such petition, the Board shall send all the records in the case to such court, and promptly notify the superintendent of the hospital, or manager or director of the institution or place of incarceration involved, of the appeal.

In this appeal, the person for which an order of sterilization has been issued shall be designated as the plaintiff, and the superintendent of the hospital, or manager or director of the institution or place of incarceration in which said patient or inmate is confined, shall, in his official capacity, be designated as the defendant, the said case being tryable at the first term, as in the case of other appeals.

Section 11. *Jury*.—The proceedings before the Superior Court shall constitute a trial de novo, and upon application of either party shall be heard before a jury.

Section 12. *Writ of error; Costs*.—Any decision of the Superior Court, or of any court in such cases, may be appealed to the higher courts of the State as in civil cases.

The costs of appeal, if any, to the Superior and higher courts, shall be taxed as in civil cases.

Section 13. *Stay of proceedings; Operation and report.*—The pendency of any appeal shall stay proceedings under the order of the State Board of Eugenics until the appeal be determined. Should the State Board of Eugenics in hearing above provided for disapprove the recommendation of the superintendent, manager or director, for sterilization, or in case of appeal, should the decision of the court uphold the plaintiff's objection to the order; such disapproval or decision shall annul the order to sterilize.

Should the court find against the plaintiff, then if no appeal is filed within 10 days after such decision, the recommendation of said Board shall be put into effect at a time fixed by the superintendent, manager, or director of the hospital, institution or place of incarceration in which the patient or inmate is under care or is being detained; and the patient or inmate shall be sterilized as provided in Section 3 of this Act, whereupon the superintendent, manager or director shall file a report of the operation with the State Board of Eugenics.

Section 14. *Non-liability.*—Be it further enacted, That neither said superintendent nor any other person legally participating in the execution of the provisions of this Act shall be liable either civilly or criminally on account of said participation. (Acts 1937, pp. 414-419.)

Penalty for Dumping Trash on Right-of-Way of Public Road.

GEORGIA LAWS 1945.

Section 1. That Chapter 26-81 of the Code, same being entitled "Acts of Malicious Mischief," be amended by adding a new Section thereto to be known as Section 26-8117, and to read as follows:

Any person, firm or corporation who shall wilfully empty, dump, or otherwise place, any trash, tin cans, garbage, rubbish, dead animals, or other discarded materials upon the right-of-way of any public road, State aid road, State highway, or upon the lands of another without first having obtained his permission, shall be guilty of a misdemeanor. (Acts 1945, pp. 278-279.)

SUPPLEMENT TO
1949 REVISION OF
GEORGIA HEALTH LAWS AND RULES AND
REGULATIONS OF STATE BOARD
OF HEALTH

April 1950

BOARD OF HEALTH—RULES AND REGULATIONS

Violation of regulations misdemeanor. On and after the passage of this Act, it shall be unlawful for any person, or persons, to violate or fail to obey or to comply with any rules and regulations made, established, adopted or enacted by the State Board of Health of Georgia under authority vested in such State Board of Health in Sections 88-107, 88-112 and 88-117 of the Georgia Code of 1933, or any amendment or amendments which have been or may hereinafter be made in such sections. Any person, or persons, who shall violate or fail to obey or to comply with any such rule or regulation of said Board of Health shall be guilty of a misdemeanor and upon conviction therefor by any court of law shall be punished as for a misdemeanor. (Acts 1950, p. 190.)

88-203, Georgia Code 1933. *Rules and regulations, authority of county boards to make.* Amended in 1950 by adding: provided that the certificate or attestation of the chairman or any member of a county board of health in counties having a population of three hundred thousand or more according to the United States census of 1940, or any future census, shall give sufficient validity or authenticity to any copy or transcript of any record, document, paper or file or other matter or thing in their respective office or pertaining thereto to admit the same in evidence. (Acts 1950, pp. 345, 346.) *Note: See page 13 of bulletin.*

88-205, Georgia Code 1933. *Rules and regulations to be advertised.* Amended in 1950 by adding: provided that the finding by county boards of health in counties having a population of three hundred thousand or more according to the United States census of 1940, or any future census, duly entered upon the minutes of such boards of health that such rules and regulations have been posted at the courthouse door of the county and published at least once in the newspaper of the county in which the sheriff's notices are advertised shall be prima facie evidence of such posting and publication. (Acts 1950, pp. 346, 347.) *Note: See page 13 of bulletin.*

PERSONATION OF HEALTH OFFICER

Section 1. *Personation.* It shall be unlawful for any person to falsely claim or hold himself out to be an officer, agent, employee, or in any way a representative of the State Board of Health, or the Georgia Department of Public Health, or any county, city-county or city board of health or health department.

Section 2. *Punishment.* Any person upon conviction for such unlawful act in any court of law shall be punished as for a misdemeanor. (Acts 1950, p. 222.)

INDUSTRIAL HYGIENE

Reports of State Board of Health. It shall be the duty of the State Board of Workmen's Compensation to report to the State Board of Health all occupations found to be hazardous and all cases of occupational disease which are filed in the office of the State Board of Workmen's Compensation. The forms for such reports shall be supplied to the State Board of Workmen's Compensation by the State Board of Health. (Acts 1946, pp. 102, 119.)

MILK—STANDARDS

GEORGIA LAWS 1950

Section 1. *Grade A only.* That on and after the passage of this Act, all fluid milk, cream, buttermilk, and milk beverages sold, offered for sale, or delivered for the purpose of human consumption shall be Grade A, only, according to specifications in the laws, and rules and regulations promulgated by the Commissioner of Agriculture.

Section 2. *Regulations of Commissioner of Agriculture.* The Commissioner of Agriculture is hereby empowered and shall hereby have the authority to promulgate rules and regulations prescribing the sanitary standard requirements of all milk sold, or offered for sale, in this State provided that no rules and regulations shall be promulgated setting up standards lower than those as set forth in the United States Public Health Ordinance Code.

Section 3. *From other States.* It is hereby required that all milk and milk products shipped into this State from another State shall meet the sanitary standards and requirements of the law, and the rules and regulations promulgated by the Commissioner of Agriculture.

Section 4. *Revocation of permits.* The Commissioner of Agriculture shall have the power and authority to revoke or cancel the permit, or license, of any person, firm or corporation doing business in the State who violates any of the provisions of this Act.

Section 5. *Powers of municipalities and counties.* All municipalities, cities, towns and counties shall have the power and authority by ordinance or otherwise to set up standards concerning all milk and milk products sold within their limits higher than the standards prescribed heretofore in this Act, and such municipalities, cities, towns and counties shall have the power and authority to revoke or cancel the permit or license of any person, firm or corporation doing business within their limits who violates any of the provisions of this Act, or ordinance, or rule or regulation, or order prescribed by said municipalities, cities, towns or counties. No rules and regulations shall be promulgated by the Commissioner of Agriculture denying any municipality, city, town or county the power and authority provided for in this section. (Acts 1950, pp. 167, 168.)

TUBERCULOSIS CONTROL

Authority of Board to transfer tubercular prisoners. The State Board of Corrections may transfer any inmate afflicted with active tuberculosis from the Georgia State prisons, or any other institution operating under the authority of the State Board of Corrections to a tubercular ward or facility, specially provided for criminals at a tuberculosis facility or facilities operating under the State Department of Public Health: Provided the transfer of such inmate is found to be advisable by a board of examining physicians created by executive order of the Governor. (Acts 1946, pp. 46, 50.)

TUBERCULOSIS—PAYMENT TO CITIES AND COUNTIES FOR CARE OF PATIENTS

Payment to cities and counties for maintaining institutions for tubercular. From and after the passage of this Act the Georgia Department of Public Health shall have the power to use funds which might become available from the State Tuberculosis Sanatorium appropriation, or from other sources, to pay to cities and counties the cost, or part of the cost of maintaining institutions for the care, treatment and isolation of clinically active and convalescent tuberculosis patients, provided that payment shall not exceed per patient per day the actual cost of the care and maintenance and isolation of such patients by the city or county, or shall not exceed the patient per capita cost per day of Battey State Hospital, whichever is the least; and provided that the standard of operation of the city or county institutions and of the care and treatment and isolation of the patients is approved by the Georgia Department of Public Health, and provided that the Georgia Department of Public Health deems the operation of the institution or institutions useful in carrying out the public health program in this State. (Acts 1950, p. 344.)

R E F E R E N C E S

Employees Retirement System

Amendment—Georgia Laws 1950, pages 416-417

Hospital Authorities

Validation of Revenue Anticipation Certificates—Georgia Laws 1950, pages 20-23

Insane Persons

Arrest and Commitment—Georgia Laws 1950, pages 30-32

Non-Profit Medical Service Act

Georgia Laws 1950, pages 266-278

Non-Profit Hospital Service Corporations

Georgia Laws 1950, pages 335-341

State Board of Funeral Service

Georgia Laws 1950, pages 238-254

Vital Statistics

When justice of peace may act as coroner—
Georgia Code 1933, Section 21-204, page 462

REFERENCES

References to Laws Related to Public but Not
Published in This Bulletin

Barber Shops, Sanitary Regulations of

Georgia Code 1933, Section 84-404, pages 1979-1980

Billiard Rooms, Sanitation of

Georgia Code 1933, Section 84-1608, page 2043

Cerebral Palsy

Georgia Laws 1949, pages 278-280

Child Labor

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Dairies, Sanitation of

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Dead Bodies, Distribution of Unclaimed

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Dead Bodies, Transportation of

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Drainage, Establishment of System of County

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Nuisance, Abatement of

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Georgia Code 1933, Chapter 88-4, pages 2153-2157

Poison and Narcotics, Sale of

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Used Clothing

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